



Date of Questionnaire: _____

CDL DRIVER INFORMATION QUESTIONNAIRE

Office Use Only:
D: _____ / MVR: _____ / R: _____

Name: _____ Soc. Sec #: _____
Address: _____ City: _____ Zip: _____
Home Phone: (_____) _____ Cell: (_____) _____
Email Address: _____
Have you ever worked / applied with INFINITI? _____ If Yes, When? _____
What two forms of ID did you bring in today? _____

What Class Drivers License do you have: _____ Hours / Shifts: _____
What Endorsements do you have? _____ Minimum Starting Pay Rate: _____
How long have you been looking for work? _____ Form of Transportation: _____

EMPLOYMENT RECORD: List in order starting with the most recent employer. If you have experience driving a commercial motor vehicle the D.O.T. requires all employment be shown for the last 10 years. The D.O.T. also required all motor carriers to inquire into past employment.
PLEASE ACCOUNT FOR ALL GAPS BETWEEN EMPLOYERS. ALL SECTIONS MUST BE COMPLETE.

MOST RECENT / CURRENT WORK EXPERIENCE: (Please fill out completely)

1. Present or Last Employer: Name _____ Phone (_____) _____
City: _____ State: _____ Position Held: _____ Reason for Leaving: _____
Dates: From _____ to _____ Supervisor: _____ Pay: Start _____ Finish _____
Duties Performed / Describe a Typical Day: _____
Type of Truck Driven / How Long: _____ What type of Product: _____
Equipment / Software Used: _____ Transmission Type: _____

2. Present or Last Employer: Name _____ Phone (_____) _____
City: _____ State: _____ Position Held: _____ Reason for Leaving: _____
Dates: From _____ to _____ Supervisor: _____ Pay: Start _____ Finish _____
Duties Performed / Describe a Typical Day: _____
Type of Truck Driven / How Long: _____ What type of Product: _____
Equipment / Software Used: _____ Transmission Type: _____

3. Present or Last Employer: Name _____ Phone (_____) _____
City: _____ State: _____ Position Held: _____ Reason for Leaving: _____
Dates: From _____ to _____ Supervisor: _____ Pay: Start _____ Finish _____
Duties Performed / Describe a Typical Day: _____
Type of Truck Driven / How Long: _____ What type of Product: _____
Equipment / Software Used: _____ Transmission Type: _____

Are you willing to submit to a Pre-Employment Drug Test Today?
Do you authorize INFINITI to perform a Background Check?
Have you ever been convicted of a Felony?
Have you ever been convicted of a Misdemeanor?

- When are you available to start working? _____
- Do you have any upcoming scheduled appointments that would cause you to miss work? _____
- The position you are applying for may require heavy lifting, bending, stooping, walking, kneeling, crawling, dragging, running, pulling, stretching, sitting or standing for long periods of time. Is there any reason you may not be able to do any of the essential functions described herein? _____

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1. How much experience do you have driving with a CDL License? _____
 2. How many points do you have on your MVR? _____
 3. Have you had any accidents? _____
 4. Have you ever had a DUI, Careless or Reckless Driving Charge? _____
 5. Do you have a current D.O.T Medical Card? _____ Expire Date: _____
 6. How well do you know the Orlando Area? _____
 7. Are you willing to Load & Unload / Touch Freight? _____

Comments: _____

Applicant Signature: _____ **Date:** _____

SEND BY EMAIL