

**NORTH EAST TOWNSHIP
APPLICATION FOR CDL EMPLOYMENT**

NORTH EAST Township
P.O. BOX 249, 10300 WEST MAIN RD.
 (Address)
NORTH EAST, PA 16428
 City State Zip

Name _____
 (First) (Middle) (Maiden name, if any) (Last)

Address _____ How Long? _____
 (Street number and name) (City) (State & Zip Code)

Date of Birth _____ SS # _____

Address for past three year (if same as above write "same" in blanks):

Address _____ How Long? _____
 (Street number and name) (City) (State & Zip Code)

Address _____ How Long? _____
 (Street number and name) (City) (State & Zip Code)
 (Attach separate sheet if additional space is necessary)

EXPERIENCE & QUALIFICATIONS - DRIVER

| Driver Licenses | STATE | LICENSE NO. | TYPE | EXPIRATION DATE | |
|-----------------|-------|-------------|------|-----------------|--|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Driving Experience

| Class of Equipment | Type of Equipment | TYPE | EXPIRATION DATE |
|--------------------------|-------------------|------|-----------------|
| Straight Truck | | | |
| Tractor and Semi Trailer | | | |
| Tractor - Two Trailers | | | |
| Other | | | |

Accident Report for past 3 years or more (attach separate sheet if necessary)

| Dates | Nature of Accident (Head-on, Rear end, Upset, etc) | Fatalities | Injuries |
|----------------|---|------------|----------|
| Last Accident | | | |
| Next Accident | | | |
| Next Accidents | | | |
| Other | | | |

Traffic Convictions and Forfeitures for the past 3 years (other than parking violations)

| Location | Date | Charge | Penalty |
|----------|------|--------|---------|
| | | | |
| | | | |
| | | | |
| | | | |

- A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes ___ No ___
- B. Has any license, permit or privilege ever been suspended or revoked? Yes ___ No ___

IF THE ANSWER TO EITHER A OR B IS YES, ATTACH A STATEMENT GIVING DETAILS

Employment Record
(Attach sheet if additional space is necessary)

NOTE: PA DOT requires that employment for at least 3 years and/or Commercial Driving Experience for the past 10 years be shown.

Last Employer: Name _____
 Address _____
 Position Held _____ From _____ To _____ Salary _____
 Reason for Leaving _____

Previous Employer: Name _____
 Address _____
 Position Held _____ From _____ To _____ Salary _____
 Reason for Leaving _____

Previous Employer: Name _____
 Address _____
 Position Held _____ From _____ To _____ Salary _____
 Reason for Leaving _____

TO BE READ AND SIGNED BY THE APPLICANT

This certifies that the application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

_____ Date

_____ Applicant's Signature

Note: A motor carrier may require an applicant to provide information in addition to the information required by the Federal Motor Carriers Safety Regulations.

Date: _____

I, _____ hereby grant permission to the North East Township Board of Supervisors or its designated agents to access my 10-year driving record. I understand that potential and/or continued employment with this governmental entity depends on a limited number of moving violations on my driving record. I understand that I must notify my employer of any moving violations within 5-days of receiving any moving violation citation. Furthermore, I grant permission to the municipality to investigate this driving record on an annual basis. I understand that this release is necessary for North East Township to assure compliance with PA Title 67 § 229 and §231.1 of the PA Motor Vehicle Code and North East Township employment policies. I have been provided with a copy of the Commercial Driver's license policy as adopted by North East Township Municipality and agree to comply with the provisions stated contents stated therein for the term of my employment.

I understand that the following information must be provided in order for North East Township to obtain this information via PA Dot Internet Business Services or by mail in request and provide this information on a voluntarily basis.

Full Name: _____

Driver's License Address: _____
(not to be used on internet for mail in requests only)

Driver's License Number: _____

Social Security Number: _____
(not used on internet for mail in purposes only)

I understand that upon request as made to Erica Carlstrom (contact person) of North East Township will supply me with a copy of any and all information they have obtained for employment purposes. This information shall be deemed confidential and shall be maintained in a locked file with limited access. This agreement shall cease upon the termination of my employment with North East Township Municipality but shall not be deemed as retroactive.

Applicant Name