

DRIVER DATA SHEET

NAME: DATE OF BIRTH: HIRE DATE:
ADDRESS: CITY STATE ZIP
PHONE #: SOCIAL SECURITY #:
EMPLOYEE #: ACCOUNT: INACTIVE DATE:
(DQ1, DQ4, DQ9, DQ10, DQ11, DQ-CM1, DQ1-C/M2 (signed), DQ1-C/M 3, DQ-C/M 7 :

Must be completed before orientation

DOT FILE (DQ):

DATES:

DQ1 - Application, 2nd pg completed, work history(10yrs no gaps), request form
DQ1 - Request for Check of Driving Record
DQ1 -Driver's Right Under FMCSR 391.23
DQ 2 - Copy of Drivers License / CDL, Class, State, License # Expires:
DQ 3 - Copy of Social Security Card or Birth Certificate
DQ 4 - Motor Vehicle Report MVR CDLIS
DQ 5 - Certification of Violations
DQ 6 - Certification of Compliance
DQ 7- Driver's Statement of On Duty Hours
DQ 8- Drivers Receipt for Federal Motor Carrier Handbook
DQ 9 - Record of Road Test
DQ 10 -Copy of Road Test Card
DQ 11 - Medical Certificate Date of Exam: Expires:

DOT / CONFIDENTIAL FILE (DQ-C/M):

DQ -C/M 1 - Pre employment drug screen completed on COC MRO
DQ1 - (C/M 2) - Previous Employment Verification for the Past 3 Year Verified: Signed:
DQ1- ((C/M 3) - Release & Documentation of Pre-Employment Testing Information
DQ-C/M 4 - D.D.T. A. - release form
DQ-C/M 5 - Receipt for Drug and Alcohol Policy
DQ -C/M 6 -Receipt for JJ Keller's Drug and Alcohol Testing Handbook
DQ-C/M 7 -Long Form Physical

CONFIDENTIAL HUMAN RESOURCE FILE (C/HR)

C/HR 1 - Federal I-9
C/HR 2 - Federal W-4
C/HR 3 - State W-4
C/HR 4 - Authorization for Tax Escrow Withholding
C/HR 5 - Pre-Screen Notice & Certification Request: Welfare-to-Work Credits
C/HR 6 - Anthem Form
C/HR 7 - 90/10 Upgrade (Optional)
C/HR 8 - Sun Life - Life Insurance
C/HR 9 - Sun Life - Dental form
C/HR 10 - Eye Vision Enrollment Form
C/HR 11 - 401(k) Beneficiary

PERSONAL FILE (PF)

DQ1 (needs filed in Personal file) - PSP form
PF 1 - Extra Board Requirements (when applicable)
PF 2 -Sign off for 2-week hold on Payroll- provide copy to applicant Applicant Signed off
PF 3 -Acknowledgement Form - Aim & Driver Policy Handbook
PF 4 - Direct Deposit Form with No. of Voided Check
PF 5- Cell Phone Policy
PF 6 -Voluntary Self Identification form
PF 7 - Emergency Notification form
PF 8 - Aim Injury Reporting Procedures-----form provided to applicant
PF 9 - Pre-Trip Inspection Requirements Applicant Signed Off
PF 10 - Inspection Levels-----form provided to applicant
PF 11 - Notification of Traffic Violation-----form provided to applicant
PF 12 - Three PT Contact, Breg Spill Kit, Fuel Level Acknowledgment Form
PF 13 - Logs: Orientation training form provide copy to applicant Applicant Signed Off
PF 14- On Duty Time Definitions form provide copy to applicant Applicant Signed Off
PF 15 - Hours-of-Service Outline w/ safety assistant contact number - form provided to applicant
PF 16 - Example of complete log form-----form provided to applicant
PF 17- Log Quiz
PF 18 -Smith System Quiz
PF 19 - Following Distance Quiz (Smith System)
PF 20 - CSA Handbook / Quiz Sign off Form
PF 21 - Location Listings for Integrated & Nationalease----- provided copy to applicant
Miscellaneous/ letters / Additional Training info: