

Previous Employer Driver Inquiry

Part 1 TO BE COMPLETED BY PROSPECTIVE EMPLOYER

I, _____ - _____ - _____
 _____ FIRST M.I. LAST SOCIAL SECURITY NUMBER

Do hereby authorize my:

Previous Employer: _____ Phone: _____
 Address: _____ Fax: _____
 City, State, Zip: _____ E-mail: _____

To release all information regarding my services, character, and conduct while in your employ, and you are released from any and all liability, which may result from furnishing such information to the prospective employer listed below:

Perspective Employer: _____ Phone: _____
 Address: _____ Fax: _____
 City, State, Zip: _____ E-mail: _____

In compliance with Part 391.23(h), release of this information must be made in a written form that ensures confidentiality, such as fax, e-mail or letter.

 APPLICANT'S SIGNATURE DATE

PART 2: TO BE COMPLETED BY PREVIOUS EMPLOYER

1. The applicant named above was employed by us from (m/y) _____ to (m/y) _____
2. What kind(s) of work did the applicant do? _____
3. Did the applicant drive a motor vehicle for your? Straight Truck Tractor Semi-trailer Bus
 Passenger Vehicle Other
4. Was the applicant a safe and efficient driver? _____
5. Was the applicant involved in any accidents? If so, include dates (d/m/y), and brief explanation:

6. Was the driver ever placed out-of-service for hours of service violations? Yes No
 Explanation: _____

7. Did the applicant misuse alcohol or use a controlled substance? _____
8. Was the applicant's general conduct satisfactory? _____
9. Reason for leaving your employ: Discharged Laid Off Resigned
10. Remarks: _____

Print Name: _____ Position: _____
 Signature: _____ Date: _____

The Federal Motor Carrier Safety Regulations require all previous employers of this applicant to respond to this request for information within 30 days. Failure to comply with this request is in violation of 49 CFR Part 391.23.