

DIAMOND TRANSPORTATION SC LLC

65 SCHINGER AVENUE SUITE 104 RIDGELAND SC 29936

DRIVER APPLICATION (REV 7-23-19)

INSTRUCTIONS: Please read and complete all sections of this document legibly in your own handwriting using a pen. Applications that are incomplete may be rejected. Applications will be considered active for 90 days after the application date. Diamond Transportation consistently confirms background information provided by applicants; for this purpose, it is essential that all responses provided by the applicant be accurate and complete. Federal and state laws prohibit discrimination based on characteristics.

Personal Information

Name:

Last

First

Middle

Current address:

How long?

Street

City

State

Zip

Previous 3 YRS Residency

YRS

Street

City

State

Zip

YRS

Street

City

State

Zip

YRS

Street

City

State

Zip

Telephone number:

()

SSN:

Date of birth:

Are you legally authorized to work in the US?

Yes

No

The U.S. Department of Transportation (DOT) and the State of South Carolina requires an individual to be properly licensed to operate a motor vehicle, further requiring commercial drivers to be at least 21 years of age and have two years of Public Auto driving experience. Additional requirements include: [a] a ten year certified copy of your driver record from SC DMV; [b] a SC State criminal background check; and [c] a SC sex offender registry check. In accordance with DOT and company policies, pre-employment drug testing may be required as well as random drug and alcohol testing. Diamond may specify that an individual meet physical qualifications necessary to the safe operation of a motor vehicle. If you are uncertain as to whether you are capable of passing a DOT physical and/or physical capabilities assessment or have questions regarding the requirements, you may submit your application and, if contacted, request additional information from a member of our staff. You may be required to answer medical questions and may be required to undergo pre-employment testing, including but not limited to a medical examination and/or physical capabilities assessment. Any information provided to Diamond Transportation is strictly confidential.

Criminal Convictions

List all criminal convictions in the past ten years. If none, write "none".

Date	Charge	Location (State)	Penalty	Explanation/Comments

Prior Driving Experience: (list all driving positions held in the last five years)

Employer	Address	From	To	Type of Vehicle	Reason for leaving

Were you subject to Federal Motor Carrier Regulations at any of the previous employers?

Yes No

Were you subject to drug and alcohol testing at any of the previous employers?

Yes No

Have you ever tested positive for either drugs or alcohol?

Yes No

Traffic Violations

If none, write "none". List all traffic violations/convictions, forfeitures and suspensions of license to operate a motor vehicle (other than parking violations) in the past five years:

Date	Type of vehicle	Location (State)	Charge	Penalty

Accident Record

List all accidents you have been involved in, regardless of whether you were at fault, while operating any type of motor vehicle, including property damage, in the past five years: (if none, write "none")

Date	Nature of Accident	At fault?		Ticketed?		Points Received?		Fatalities or Injuries?	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Motor Vehicle-Specific Criminal History

Have you ever been denied a license, permit or privilege to operate a motor vehicle?

Yes No

Has your driver's license or other permit to operate a motor vehicle ever been suspended or revoked?

Yes No

Have you ever been convicted of reckless driving?

Yes No

Have you ever been convicted of driving under the influence of drugs or alcohol?

Yes No

If you answered "yes" to any of the above, please provide details below:

Certification

It is understood that an investigative consumer report pursuant to the Fair Credit Reporting Act may be made whereby information is obtained through personal interviews with my neighbors, friends or others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and way of living. By signing this application, I hereby consent to Diamond Transportation obtaining such a report.

I hereby authorize Diamond Transportation to obtain any medical documentation or information concerning my past or present medical history after a job offer is made and release all persons contacted from any liability or damages. I specifically authorize employers listed on this application to release any drug and alcohol and medical test results to Diamond Transportation.

I hereby authorize, without liability, any person or organization, including but not limited to any educational institution, training facility or any institution whose name I have given as a reference, or by whom I have been previously employed, to furnish Diamond Transportation any information they may have concerning my previous employment or training, or to give such information to other companies and carriers requesting such information. I hereby release all such persons and organizations from any claims for damages of any kind which may occur to me by reasons of furnishing such information. I hereby authorize any law enforcement agency or court of record to furnish Diamond Transportation information concerning my motor vehicle record (MVR) or any felony or misdemeanor of which I have been convicted.

I understand that information I provide regarding current and/or previous employers may be used, and those employer(s) will be contacted for the purpose of investigating my safety performance history as required by 49 CFR 391.23(d).

I understand that I have the right to:

- Review information provided by current/previous employers;
- Have errors in the information corrected by previous employers and for those previous employers to re-send the corrected information to the prospective employer; and
- Have a rebuttal statement attached to the alleged erroneous information, if the previous employer and I cannot agree on the accuracy of the information.

Citizenship Status

Are you a US citizen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you are not a US citizen, are you properly credentialed to work in the US? If so, describe below.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Explanation of US work status if not a US citizen:

My signature below certifies that I have personally completed this application and that all information contained within is correct to the best of my knowledge. I understand that the deliberate falsification of this information would be grounds for termination in accordance with the policy of this organization.

Applicant Signature: _____

Date: _____

Printed Name: _____