

Call, Mail or Fax Application Today!



Driver Recruiting: 1-877-882-6537

Recruiting Fax: 1-863-638-1927

Select One: Company Driver

Name: _____ SSN: _____

Home Phone: _____ Cell Phone: _____ DOB: _____

Address: _____ City: _____ State/Zip Code: _____

Drivers License Information

State: _____ License # _____ Expiration Date: _____ Endorsements: _____

Any DUI's or DWI's? Yes No If Yes, list dates: _____

Any Felony Convictions? Yes No If Yes, list dates: _____

Ever Failed/Refused Drug/Alcohol Test? Yes No

List all accidents in last 3 years and dates: _____

List all moving violations in last 3 years and dates: _____

Employment History

Present Employer: _____ From: _____ To: _____

Address: _____ City: _____ State/Zip Code: _____

Telephone # _____ Position Held: _____

Previous Employer: _____ From: _____ To: _____

Address: _____ City: _____ State/Zip Code: _____

Telephone # _____ Position Held: _____

Previous Employer: _____ From: _____ To: _____

Address: _____ City: _____ State/Zip Code: _____

I hereby certify that I personally completed this form and that the information provided is true and correct to the best of my knowledge. I authorize Oakley Transport, Inc. to obtain information relating to my past and present work history and to complete a background investigation in accordance with state and federal laws. I also give my consent to any present or previous employer, their agent, or medical review officer to release information concerning drug and alcohol testing as required by the DOT per 49 CFR Part 40. Furthermore, I agree to hold harmless Oakley Transport, Inc. and any current or former employers for the release of said information.

Signature _____ Date _____