



MLC TRANSPORTATION, LLC

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ADDITIONAL EMPLOYMENT APPLICATION INFORMATION FOR DRIVER APPLICANTS

TODAYS DATE: _____ DATE OF BIRTH: _____

List all addresses at which you have resided for the previous three years:

List the State, number and expiration date of each current operators license or permit that has been issued to you:

Summarize the nature and extent of your experience operating commercial motor vehicles. Include the type of equipment operated:

List all motor vehicle accidents in which you have been involved in for the previous three years:

<u>DATE</u>	<u>DESCRIPTION</u>	<u>INJURIES/FATALITIES</u>
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(OVER)

List all violations of motor vehicle laws for which you have been convicted or forfeited bond during the previous three years:

DATE OFFENSE LOCATION TYPE OF VEHICLE

Have you ever had a license, permit or privilege to operate a motor vehicle denied, revoked or suspended?

YES _____ NO _____

If yes, explain:

If you have not done so on the application form, list all previous employers for the last three years below. Include name, address, and dates of employment and reason for leaving. Also list the same information for any employer in the previous ten years for which you operated a commercial motor vehicle.

This certifies that I completed this application and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature: _____ Date: _____