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| DRIVER SUPPLEMENTAL APPLICATION |
| Account Name:  | Effective Date:  |
| Producer:  | State:  |
| How many drivers are employed?\_\_\_\_\_\_ |  |  |
| Indicate number of drivers in each age group:Under 21:\_\_\_\_ Age 21 – 24:\_\_\_\_\_ Age 25 and over:\_\_\_\_\_ Over 65:\_\_\_\_\_  |  |  |
| What is the average length of employment for the drivers:\_\_\_\_\_ |  |  |
| Describe driver training and incentive programs: |  |  |
| Describe action taken with repeat offenders or employees with unacceptable driving records: |  |  |
| Do only properly licensed drivers operate CDL units? | Yes[ ]  | No[ ]  |
| Are company vehicles taken home by employees? | Yes[ ]  | No[ ]  |
| Do employees operate company vehicles for personal use? | Yes[ ]  | No[ ]  |
| Are family members allowed to operate company vehicles? | Yes[ ]  | No[ ]  |
| Are accidents recorded so repeaters can be easily identified?  | Yes[ ]  | No[ ]  |
| Indicate which of the following driver hiring procedures are used. | Yes | No |
| Application for employment:  | [ ]  | [ ]  |
| Motor vehicle record obtained:  | [ ]  | [ ]  |
| Previous employer checked:  | [ ]  | [ ]  |
| Road Test:  | [ ]  | [ ]  |
| Drug Test:  | [ ]  | [ ]  |
| Written Exam:  | [ ]  | [ ]  |
| Physical Exam:  | [ ]  | [ ]  |