

Company Information

Company Name	Sample Trucking LLC
Contact Name	Hiring Team
Email	hiring@example.com
Phone	(217) 555-0100

Basic Information

First Name	Michael
Last Name	Carter
Email	michael.carter@example.com
Phone	217-555-0148
Address	2418 Prairie View Rd
City	Springfield
State	IL
Zip Code	62704
Date of Birth	06/14/1986
SSN	000-12-3456
Driver Type What type of position are you applying for?	Company driver
Applying Location What location are you applying for?	Chicago, IL
Legally Eligible Are you legally eligible for employment in the United States?	Yes
Currently Employed Are you currently employed?	Yes
Last Employment End Date	
License Type	Class A
CDL Number	C41027395816
Issuing State	IL
CDL Holder Since	2016
CDL Issue Date	03/22/2023
HAZMAT	No
TWIC	No
Doubles/Triples	No
Tanker	No
Passenger	No
Straight Truck Experience	3-4 years
Tractor and Semi-Trailer Experience	More than 8 years
Tractor - Two Trailers Experience	1-2 years
Total companies changed in past 3 years	1
Years of Driving Experience	10
Home Time How often do you want to go back home?	once a week
Home Stay Duration How long do you want to stay home?	1-2 days

Previous Employment History #1

Company Name	Prairie Freight Lines
Start Date (MM/YYYY)	2019-04-01
End Date (MM/YYYY)	2026-08-01
Address	
City	Peoria
State	IL
ZIP Code	
Phone	
Email	
Fax	
Position Held	Company driver
Reason for Leaving	
Were you terminated/discharged/laid off?	No
Is this your current employer?	Yes
May we contact this employer?	Yes
Did you operate a commercial motor vehicle?	Yes
Were you subject to the FMCSR?	Yes
Did you perform safety-sensitive functions?	Yes
Areas Driven	
Miles Driven Weekly	
Pay Range (cents/mile)	
Most Common Truck Driven	Semi-Truck (Tractor-Trailer / 18-Wheeler)
Most Common Trailer	Dry Van Trailer
Trailer Length	

Authorization

Federal FCRA Summary of Rights Acknowledgment By checking this box, I acknowledge that I have read and understand the federal FCRA Summary of Rights.	Yes
PSP Disclosure and Authorization	Yes
FCRA Disclosure	Yes
FCRA Authorization	Yes
Employment Verification Acknowledgment and Release (DOT Drug and Alcohol)	Yes
Clearinghouse Release	Yes
Summary of Rights Under 15 U.S.C. Section 1681m(a)	Yes
Investigative Consumer Report Disclosure	Yes

Background Check

Disqualification Status Under FMCSR 391.15, are you currently disqualified from driving a commercial motor vehicle?	No
License Suspension History Has your license, permit or privilege to drive ever been suspended or revoked?	No
License Denial History Have you ever been denied a license, permit, or privilege to operate a motor vehicle?	No
Drug and Alcohol Testing History Within the past two years, have you tested positive, or refused to test?	No
Criminal History In the past three(3) years, have you ever been convicted of any offenses?	No

Final Signature & Agreement

By signing below, I confirm that all information provided is true and complete.
I authorize TruckDriverApp to run MVR and PSP checks as part of my application process.

Signature:	
Agreement I agree and authorize TruckDriverApp to run MVR and PSP as part of my application.	Yes

This is an automated message from TruckDriverApp.
Submission time: 10/09/2026 18:05