



Do you presently have a Class A CDL license? \_\_\_ Yes \_\_\_ No  
 Do you presently have a Class B CDL license? \_\_\_ Yes \_\_\_ No  
 If yes, do you have points against your license? \_\_\_\_\_  
 Do you have a CDL Learner's Permit? \_\_\_ Yes \_\_\_ No

**Employment Experience**

Start with most recent

Dates (mo./yr.)	Name and Address of Employer	1. Job Title 2. Department/Supervisor	Describe Major Duties	Reason for Leaving
From _____ To _____		1. 2.		
From _____ To _____		1. 2.		
From _____ To _____		1. 2.		
From _____ To _____		1. 2.		
From _____ To _____		1. 2.		
From _____ To _____		1. 2.		
From _____ To _____		1. 2.		

**Personal References**

List three references other than employers or relatives

Name	Address	Occupation	Telephone Number

In case of emergency, notify:

Name	Address	Relationship	Telephone Number

I understand that employment is subject to the taking of a physical examination by a designated physician, the satisfactory completion of a pre-employment drug and alcohol screen.

I certify that the information I submitted is correct and complete to the best of my knowledge. I understand that any misstatement or omission of fact from this application shall be considered cause for dismissal at the discretion of the company. I authorize the company to make a confidential review of my character and ability including securing any report.

I agree that this application is not intended to create a contract of employment with Citilink.

Date: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_