



Pocahontas Aluminum Company inc.

PO BOX 756 ♦ 2001 Industrial Drive ♦ Pocahontas AR 72455 ♦ Phone 870-892-3689 ♦ Fax 870-892-9858

OTR Driver Application

Applicant Information

Full Name: _____
Last First M.I.

Application Date: _____ Date Of Birth: _____
mm/dd/yyyy mm/dd/yyyy

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Phone: () _____ E-mail Address: _____

Date Available: _____ Social Security No.: - - _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If so, when? _____
mm/dd/yyyy

Have you ever been convicted of a felony? YES NO If yes, explain. _____

Referred by: _____

Education

High School: _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Degree: _____
mm/dd/yyyy mm/dd/yyyy

College: _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Degree: _____
mm/dd/yyyy mm/dd/yyyy

Other: _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Degree: _____
mm/dd/yyyy mm/dd/yyyy

References

Please list three professional / personal references.

Full Name: _____ Relationship: _____
 Company: _____ Phone: () _____
 Address: _____

Full Name: _____ Relationship: _____
 Company: _____ Phone: () _____
 Address: _____

Full Name: _____ Relationship: _____
 Company: _____ Phone: () _____
 Address: _____

Previous Employment

Give a COMPLETE RECORD of all employment for the past three (3) years, including any unemployment or self-employment periods, and all commercial driving experience for the past ten (10) years.

Company: _____ Phone: (____) _____
Address: _____ From: _____ To: _____
mm/dd/yyyy mm/dd/yyyy
Supervisor: _____ Salary/Wage: _____
Job Title: _____ Reason for Leaving: _____

Were you subject to the FMCSRs while employed here? YES NO Was your job designated as a safety-sensitive function in any DOT- regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? YES NO

Company: _____ Phone: (____) _____
Address: _____ From: _____ To: _____
mm/dd/yyyy mm/dd/yyyy
Supervisor: _____ Salary/Wage: _____
Job Title: _____ Reason for Leaving: _____

Were you subject to the FMCSRs while employed here? YES NO Was your job designated as a safety-sensitive function in any DOT- regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? YES NO

Company: _____ Phone: (____) _____
Address: _____ From: _____ To: _____
mm/dd/yyyy mm/dd/yyyy
Supervisor: _____ Salary/Wage: _____
Job Title: _____ Reason for Leaving: _____

Were you subject to the FMCSRs while employed here? YES NO Was your job designated as a safety-sensitive function in any DOT- regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? YES NO

Company: _____ Phone: (____) _____
Address: _____ From: _____ To: _____
mm/dd/yyyy mm/dd/yyyy
Supervisor: _____ Salary/Wage: _____
Job Title: _____ Reason for Leaving: _____

Were you subject to the FMCSRs while employed here? YES NO Was your job designated as a safety-sensitive function in any DOT- regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? YES NO

Company: _____ Phone: (____) _____
Address: _____ From: _____ To: _____
mm/dd/yyyy mm/dd/yyyy
Supervisor: _____ Salary/Wage: _____
Job Title: _____ Reason for Leaving: _____

Were you subject to the FMCSRs while employed here? YES NO Was your job designated as a safety-sensitive function in any DOT- regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? YES NO

*Includes vehicles having a GVWR of 26,001 lbs. or more, vehicles designed to transport 16 or more passengers (including the driver), or any size vehicle used to transport hazardous materials in a quantity requiring placarding.

†The Federal Motor Carrier Safety Regulations (FMCSRs) apply to anyone operating a motor vehicle on a highway in interstate commerce to transport passengers or property when the vehicle: (1) weighs or has GVWR OF 10,001 lbs. or more, (2) is designed or used to transport more than 8 passengers (including the driver, or (3) is of any size and is used to transport hazardous materials in a quantity requiring placarding.

Driving Experience

Class of Equipment	From	To	Approximate Number of Miles
Straight Truck			
Tractor & Semitrailer			
Tractor & two trailers			
Tractor & triple trailers			
Other			

List operated in, for the last five (5) years _____

List special courses/training completed (PTD/DDC, HAZMAT, ETC) _____

List any Safe Driving Awards you hold and from whom: _____

Accident Record for past three (3) years: (attach sheet if more space is needed):

Date of Accident	Nature of Accidents (Head on, rear end, etc)	Location of Accident	# of Fatalities	# of People Injured

Traffic Convictions and Forfeitures for the last three (3) years (other than parking violations):

Date of Accident	Location	Charge	Penalty

Driver's License (list each driver's license held in the past three (3) years):

State	License	Type	Endorsements	Expiration Date

YES

NO

Have you ever been denied a license, permit or privilege to operate a motor vehicle?

Has any license, permit or privilege ever been suspended or revoked?

Is there any reason you might be unable to perform the functions of the job for which you have applied (as described in the job description)?

Have you ever been convicted of a felony?

If the answers to any questions listed above are "yes", give details.

General Information

U.S. Military: _____ From: _____ To: _____
mm/dd/yyyy mm/dd/yyyy
Rank at Discharge: _____ Type of Discharge: _____
Special Skills or Training: _____

Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Mail to:
ATTN: Human Resource
PO Box 756
Pocahontas, AR 72455

OR

Drop off at:
Front Office
2001 Industrial Drive
Pocahontas, AR 72455

All applications will be held for a period of 30 days. If you have not received a call within 30 days, but still desire a position with Pocahontas Aluminum Company, you will need to complete another application.

Signature: _____ Date: _____
mm/dd/yyyy