

## VENTURE LOGISTICS, INC MINI APPLICATION

COMPANY DRIVER \_\_\_\_\_ OWNER OPERATOR \_\_\_\_\_  
NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
CDL # \_\_\_\_\_ STATE \_\_\_\_\_  
HAZMAT YES \_\_\_\_\_ NO \_\_\_\_\_ OTHER ENDORSEMENTS \_\_\_\_\_  
SOCIAL SECURITY # \_\_\_\_\_  
NUMBER OF TRAFFIC CONVICTION OR SUSPENSIONS IN THE LAST 5 YEARS \_\_\_\_\_  
PLEASE LIST \_\_\_\_\_

YEARS OF EXPERIENCE \_\_\_\_\_ TYPE OF EQUIPMENT \_\_\_\_\_  
HAVE YOU HAD ANY ACCIDENTS IN THE LAST 5 YEARS? PREV \_\_\_\_\_ NON-PREV \_\_\_\_\_  
PLEASE EXPLAIN \_\_\_\_\_  
HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES \_\_\_\_\_ NO \_\_\_\_\_  
HAVE YOU EVER BEEN CONVICTED OF A DWI OR DUI? YES \_\_\_\_\_ NO \_\_\_\_\_  
HAVE YOU EVER FAILED OR REFUSED A DRUG/ALCOHOL TEST? YES \_\_\_\_\_ NO \_\_\_\_\_

### EMPLOYMENT HISTORY

WE NEED THE LAST 3 YEARS OF HISTORY

CURRENT EMPLOYER \_\_\_\_\_  
DATES OF EMPLOYMENT FROM \_\_\_\_\_ TO \_\_\_\_\_  
CITY/STATE \_\_\_\_\_ PHONE \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_ POSITION HELD \_\_\_\_\_

PREVIOUS EMPLOYER \_\_\_\_\_  
DATES OF EMPLOYMENT FROM \_\_\_\_\_ TO \_\_\_\_\_  
CITY/STATE \_\_\_\_\_ PHONE \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_ POSITION HELD \_\_\_\_\_

PREVIOUS EMPLOYER \_\_\_\_\_  
DATES OF EMPLOYMENT FROM \_\_\_\_\_ TO \_\_\_\_\_  
CITY/STATE \_\_\_\_\_ PHONE \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_ POSITION HELD \_\_\_\_\_

THIS CERTIFIES THAT I COMPLETED THE INFORMATION AND THAT ALL ENTRIES ON IT ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I, HEREBY GIVE MY CONSENT FOR DAC SERVICES, ANY PREVIOUS EMPLOYER, THEIR AGENT, OR MEDICAL REVIEW OFFICER OR THEIR AGENT TO RELEASE ANY INFORMATION, INCLUDING ALL INFORMATION RELATED TO MY ALCOHOL AND CONTROLLED SUBSTANCES TESTING AND TRAINING RECORD, BY ANY FORMER EMPLOYERS AND HOLD THEM HARMLESS OF ANY LIABILITY FROM RELEASE OF SAID INFORMATION. E.O.E.

\_\_\_\_\_  
SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
REFERRED BY \_\_\_\_\_ UNIT NUMBER \_\_\_\_\_  
RETURN BY FAX TO 317-787-1190 ATTN. Gractia PHONE 888-561-4449  
VENTURE LOGISTICS, INC. 1101 S. Harding Ct., INDIANAPOLIS, IN 46217