



# Scranton Craftsmen

Metal Fabrication - Iron Railings  
Pre-Cast Concrete - Steps - Cellar Entries & Other Products  
930 Dunmore Street - Throop, PA.18512  
Fax: (570)489-4212 Phone: (570)347-5125

(ANSWER ALL QUESTIONS – PLEASE PRINT)

IN COMPLIANCE WITH FEDERAL AND STATE EQUAL EMPLOYMENT OPPORTUNITY LAWS, QUALIFIED APPLICANTS ARE CONSIDERED FOR ALL POSITIONS, WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL STATUS, OR THE PRESENCE OF A NON-JOB RELATED MEDICAL CONDITION OR HANDICAP.

DATE OF APPLICATION \_\_\_\_\_

POSITION(S) APPLIED FOR \_\_\_\_\_

SALARY DESIRED \_\_\_\_\_ FULL TIME OR PART TIME \_\_\_\_\_

NAME \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

LAST FIRST MIDDLE

ADDRESS \_\_\_\_\_

STREET CITY STATE ZIP

HOME PHONE# \_\_\_\_\_ CELL PHONE# \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_

FOR PAST STREET CITY STATE & ZIP

THREE YEARS \_\_\_\_\_

STREET CITY STATE & ZIP

DO YOU HAVE THE LEGAL RIGHT TO WORK IN THE UNITED STATES? \_\_\_\_\_

DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ DRIVER/ID # \_\_\_\_/\_\_\_\_/\_\_\_\_ STATE OF LICENSE \_\_\_\_\_

HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

CLASS OF LICENSE \_\_\_\_\_ LICENSE ENDORSEMENTS \_\_\_\_\_

HAVE YOU WORKED FOR THIS COMPANY BEFORE \_\_\_\_\_ POSITION \_\_\_\_\_

DATES: FROM \_\_\_\_\_ TO \_\_\_\_\_ RATE OF PAY \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

ARE YOU NOW EMPLOYED? \_\_\_\_\_ IF NOT, HOW LONG SINCE LEAVING LAST EMPLOYMENT? \_\_\_\_\_

WHO REFERRED YOU? \_\_\_\_\_

EMERGENCY CONTACT (NAME AND PHONE#) \_\_\_\_\_

PHYSICAL HISTORY



Do you have any physical conditions which may limit your ability to perform the job applied for? \_\_\_\_\_

If yes, what can be done to accommodate your limitation? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are you physically capable of heavy manual work? \_\_\_\_\_

How much time lost from work in the past three years? \_\_\_\_\_

Do you have any drug or chemical dependencies? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, please explain \_\_\_\_\_

\_\_\_\_\_

Comments: \_\_\_\_\_

**ACCIDENT RECORD FOR PAST 3 YEARS OR MORE (ATTACH SHEET IF MORE SPACE IS NEEDED)**

DATES	NATURE OF ACCIDENT (HEAD-ON, REAR-END, UPSET ETC.)	FATALITIES	INJURIES
LAST ACCIDENT			
NEXT PREVIOUS			
NEXT PREVIOUS			
NEXT PREVIOUS			

**TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST THREE YEARS (OTHER THAN PARKING VIOLATIONS)**

LOCATION	DATE	CHARGE	PENALTY

(ATTACH SHEET IF MORE SPACE IS NEEDED)

**EDUCATION**



	YEARS ATTENDED	COURSE	DIPLOMA
GRADE SCHOOL			
HIGH SCHOOL			
TRADE SCHOOL/COLLEGE			

**EXPERIENCE AND QUALIFICATIONS**

**DRIVER LICENSES**

STATE	LICENSE NO.	TYPE	EXPIRATION DATE

A. Have you ever been denied a license, permit, or privilege to operate a motor vehicle? Yes \_\_\_\_\_ No \_\_\_\_\_

B. Has any license, permit, or privilege ever been suspended or revoked? Yes \_\_\_\_\_ No \_\_\_\_\_

C. Have you ever been convicted of driving while under the influence of any substance? Yes \_\_\_\_\_ No \_\_\_\_\_

**DRIVING EXPERIENCE**

CLASS OF EQUIPMENT	TYPE OF EQUIPMENT (VAN, TANK, FLAT, ETC.)	FROM WHAT DATE (MONTH/YEAR)	TO WHAT DATE (MONTH/YEAR)	APPROXIMATE NO. OF MILES (TOTAL)
STRAIGHT TRUCK				
TRACTOR AND SEMI-TRAILER				
TRACTOR – TWO TRAILERS				
OTHER				

List states operated in for last five years. \_\_\_\_\_

Which safe driving awards do you hold and from whom? \_\_\_\_\_

Show any special course, training or experience that would enhance your job performance in the applied for? \_\_\_\_\_

**ALL APPLICANTS MUST COMPLETE THE FOLLOWING!**



**EMPLOYMENT HISTORY**

All driver applicants to drive interstate commerce must provide the following information on all employers during the preceding 3 years.

Applicants to drive a commercial motor vehicle (which includes vehicles having a GVWR of 26,001 lbs. or more, vehicles designed to transport 15 or more passengers or any size vehicle used to transport hazardous materials in a quantity requiring placarding.

EMPLOYER			DATE	
NAME:			FROM:MO	YR
			TO: MO	YR
ADDRESS:			POSITION HELD	
CITY:	STATE:	ZIP:	SALARY/WAGE	
CONTACT PERSON, TITLE			REASON FOR LEAVING	
PHONE NUMBER				
EMPLOYER			DATE	
NAME:			FROM:MO	YR
			TO: MO	YR
ADDRESS:			POSITION HELD	
CITY:	STATE:	ZIP:	SALARY/WAGE	
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PHONE NUMBER				



**PLEASE LIST 3 PERSONAL REFERENCES**

<b>NAME/ADDRESS</b>	<b>PHONE #</b>	<b>OCCUPATION</b>	<b>YEARS ACQUAINTED</b>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

**EXPERIENCE AND QUALIFICATIONS – OTHER**

SHOW ANY TRUCKING, TRANSPORTATION OR OTHER EXPERIENCE THAT MAY HELP IN YOUR WORK FOR THIS COMPANY. \_\_\_\_\_

LIST COURSES AND TRAINING OTHER THAN SHOWN ELSEWHERE IN THIS APPLICATION. \_\_\_\_\_

LIST ANY SPECIAL EQUIPMENT OR TECHNICAL MATERIALS YOU CAN WORK WITH OTHER THAN THOSE ALREADY SHOWN. \_\_\_\_\_

**TO BE READ AND SIGNED BY APPLICANT**

THIS CERTIFIES THAT THIS APPLICATION WAS COMPLETED BY ME, AND THAT ALL ENTRIES ON IT AND INFORMATION IN IT ARE TRUE AND COMPLETED TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE YOU TO MAKE SUCH INVESTIGATION AND INQUIRIES OF MY PERSONAL, EMPLOYMENT, FINANCIAL OR MEDICAL HISTORY AND OTHER RELATED MATTERS AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION. I HEREBY RELEASE EMPLOYERS, SCHOOLS, OR PERSONS FROM ALL LIABILITY IN RESPONDING TO INQUIRIES IN CONNECTION WITH MY APPLICATION.

IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATION OR INTERVIEW(S) MAY RESULT IN DISCHARGE. I UNDERSTAND, ALSO, THAT I AM REQUIRED TO ABIDE BY ALL RULES AND REGULATIONS OF THE COMPANY, AS PERMITTED BY LAW.

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_



# REQUEST FOR DRIVER INFORMATION

**DO NOT SEND CASH • SEE REVERSE FOR INSTRUCTIONS**

Bureau of Driver Licensing • P.O. Box 68695 • Harrisburg, PA 17106-8695

CHECK (✓) ONE ONLY:

- BASIC INFORMATION: **\$10.00 FEE** (*Driver history is not included*)
- 3 YEAR DRIVER RECORD: **\$10.00 FEE**
- 10 YEAR DRIVER RECORD: **\$10.00 FEE** (*Employment Purposes Only*)

- FULL HISTORY: **\$10.00 FEE**
- CERTIFIED DRIVER RECORD: **\$34.00 FEE**
- COPY OF DOCUMENT FROM FILE (MICROFILM): **\$10.00 FEE**
- CERTIFIED COPY OF DOCUMENT FROM FILE: **\$34.00 FEE**

You may obtain a copy of your own 3 year or 10 year Driving Record on PennDOT'S website at [www.dmv.pa.gov](http://www.dmv.pa.gov)

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**INSTRUCTIONS**

1. **To request your own record**, complete Sections A & C only. Notarization is NOT required.
2. **To request a record other than your own**, complete Sections A, C, and D. Section E must contain the driver's signature if block **B, E or L is checked in Section D. If the Requester is obtaining the information on behalf of someone else, Section B must also be completed.**
3. **PRINT OR TYPE** all requested information on the front of the form. Submitting ONLY a name and address does not provide enough information for a proper search of the driver files.
4. A non-refundable fee is required for each request. If the Bureau has no record for the information requested or the data supplied is insufficient, the fee will be applied to the cost of the search.
5. **If requesting a microfilm copy of a document**, also complete Section F. You must be specific in providing the type and date of the document. If there are several citations on the record, the cost is \$10.00 per citation. You need to provide the date of the violation/action to clearly identify the citation(s) requested.
6. Check the type of record requested at the top of the form and make check or money order payable to "PennDOT."  
**DO NOT SEND CASH.** Attach your check or money order and send to:

***For overnight and other special mail:***

BUREAU OF DRIVER LICENSING  
DRIVER RECORD SERVICES  
P.O. BOX 68695  
HARRISBURG, PA 17106-8695

BUREAU OF DRIVER LICENSING  
DRIVER RECORD SERVICES  
1101 SOUTH FRONT STREET 3RD FLOOR  
HARRISBURG PA 17104-2516

**DESCRIPTION OF INFORMATION AVAILABLE**

BASIC INFORMATION . . . . Includes name, address, driver number, date of birth and class of license.  
(\$10.00 fee)

3 YEAR RECORD\* . . . . . Includes name, address, driver number, date of birth, class, license status, Departmental actions and violations for the past  
(\$10.00 fee) 3 years from the date request is processed.

10 YEAR RECORD\* . . . . . Includes name, address, driver number, date of birth, class, license status, Departmental actions and violations for the  
(\$10.00 fee) past 10 years from the date request is processed. A 10-year record is for employment purposes only.

FULL HISTORY . . . . . Includes name, address, driver number, date of birth, class, license status, Departmental actions and violations for the  
(\$10.00 fee) **complete** history of the driver on file in Pennsylvania.

CERTIFIED RECORD. . . . . Includes name, address, driver number, date of birth, class, license status, Departmental actions and violations for the  
(\$34.00 fee) **complete** history of the driver on file in Pennsylvania certified by the Department.

MICROFILM  
DOCUMENT. . . . . Copies of documents retained by the Department are available for purchase from the microfilm file. You must be specific  
(\$10.00 fee) as to the type of document and the date of the violation/action.

CERTIFIED COPY  
OF DOCUMENT . . . . . Copies of documents from the microfilm file that have been certified by the Department.  
(\$34.00 fee)

**IMPORTANT INFORMATION CONCERNING THE USE OF DRIVER INFORMATION**

- Driver record information is confidential and restricted information and the Requestor/End User is responsible for establishing procedures to protect the confidentiality of these records.
- Driver record information can only be used for the purpose stated in Section D.
- Driver record information cannot be sold, assigned, or otherwise transferred to any party, other than the End User.
- PennDOT retains exclusive ownership of all driver record information and the Requestor/End User shall not combine and/or link in with any other data on any database except as may be required by law.
- The driver record information cannot be used for direct mail advertising or any other type or types of mail or mailings.
- The driver record information cannot be disseminated or published on the Internet without the express written permission of PennDOT.
- PennDOT reserves the right to audit each request for driver record information. If the Requestor/End User is found to have requested driver record information for an unauthorized purpose, access to Pennsylvania driver record information will be terminated.

**Visit us at [www.dmv.pa.gov](http://www.dmv.pa.gov) or call us at: 717-412-5300 ♦ TDD: 711**

\* Businesses who obtain driver records for the purpose of employment or insurance are now able to obtain and print these records, in real time, through our enhanced Online Services.

If you are an employer or insurance company/agent and are interested in becoming an authorized Online business user, please visit our website at [www.dmv.pa.gov](http://www.dmv.pa.gov) and click on "Online Business Services" for more information.