



TRANSPORTATION & SAFETY EDUCATION

TRUCK DRIVER TRAINING

3 CT Circle, Drumright, OK 74030

(800) 458-7825 or (918) 352-7311

Fax: (918) 352-4522

www.tdt-ok.com

APPLICATION FOR ADMISSION

Central Tech in compliance with Title VI of the Civil Rights Act of 1964, Title VII and Title IX of the Educational Amendments of 1974, Section 504 of the Rehabilitation Act and the American Disabilities Act (ADA), does not discriminate on the basis of race, color, religious creed, national origin, age, gender, or disability or veteran status in any of its policies, practices, or procedures. These equal opportunity provisions include, but are not limited to, admissions, employment, financial aids, and educational services.

Last Name	First	MI	Social Security Number
Date Of Birth	Home Phone Number		Alternate Phone Number
Present Mailing Address	City	State	Zip Code
Drivers License Number	License State	Class	Expiration Date

TRAFFIC CONVICTIONS/FORFEITURES: List all motor vehicle convictions and forfeitures for the past five years.

Date	Location (State)	Charge	Penalty
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Date	Location (State)	Charge	Penalty

ACCIDENT RECORD: List all accidents with motor vehicles for the past ten (10) years, include preventable and non-preventable.

Date	Type of Vehicle	Nature of Accident	Preventable /Non preventable	Yes/No Fatalities	Yes/No Injuries	Amount of Damage
Date	Type of Vehicle	Nature of Accident	Preventable /Non preventable	Yes/No Fatalities	Yes/No Injuries	Amount of Damage

Are there any restrictions on your license? Yes No If yes, explain: _____

Have you ever been?

- A. Arrested or convicted of an alcohol/drug related driving offense? Yes No
- B. Arrested or convicted for possession, sale, or use of a narcotic drug, amphetamine, or other controlled substance? Yes No
- C. Arrested or convicted of any crime or are any charges pending? Yes No
- D. Arrested or convicted of a felony? Yes No
- E. Denied a license, permit or privilege to operate a motor vehicle? Yes No
- F. Has any license, permit, or privilege been suspended or revoked? Yes No
- G. During the past (2) two years, have you tested positive on a pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by the Department of Transportation (DOT) drug and alcohol testing rules? Yes No
- H. During the past (2) two years, have you refused to test on a pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by the Department of Transportation (DOT) drug and alcohol testing rules? Yes No

If the answer was Yes to any of the above questions, list State, circumstance, and date: _____

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EDUCATION

Circle the highest grade completed: 1 2 3 4 5 6 7 8 High School: 1 2 3 4 College: 1 2 3 4 5

Are you a citizen of the United States? Yes No If no, explain: _____

Have you served in the Armed Forces within the past ten (10) years? Yes / No Dates: *from* _____ *to* _____
If Yes, attach, DD214.

PAST EMPLOYMENT REFERENCES

You must show a minimum of three (3) years verifiable employment. Show unemployed time also. Use additional paper, if necessary. Note: *Some companies may require 10 years employment. If accepted, be prepared to list additional employment history.*

Last Employer Name: _____

Address _____ City _____ State _____ Zip Code _____

Position held _____ Employment dates: _____ to _____

Reason for leaving _____ Contact person _____ Phone _____

Second Last Employer Name: _____

Address _____ City _____ State _____ Zip Code _____

Position held _____ Employment dates: _____ to _____

Reason for leaving _____ Contact person _____ Phone _____

Third Last Employer Name: _____

Address _____ City _____ State _____ Zip Code _____

Position held _____ Employment dates: _____ to _____

Reason for leaving _____ Contact person _____ Phone _____

Fourth Last Employer Name: _____

Address _____ City _____ State _____ Zip Code _____

Position held _____ Employment dates: _____ to _____

Reason for leaving _____ Contact person _____ Phone _____

(Use additional paper for employer information if needed)

STATEMENT BY APPLICANT

The facts set forth in this application are true and complete. I have read and do understand the entrance requirements as outlined by Central Tech. It is understood that information requested by a potential employer is given with my permission. I understand that if accepted, false statements on any part of this application shall be considered sufficient cause for dismissal.

SIGNATURE

DATE

