



Quincy Storage & Transfer Co.
 2925 Wismann Lane
 Quincy, IL 62301
 (217) 222-1144

Applicant Information

FULL NAME (Last) _____ (First) _____ (Full Middle) _____			
PRESENT ADDRESS _____		PHONE # () _____	HOW LONG?
CITY _____	STATE _____	ZIP _____	
ADDRESSES FOR THE PAST 3 YEARS	ADDRESS _____		HOW LONG?
	CITY _____	STATE _____ ZIP _____	
	ADDRESS _____		HOW LONG?
	CITY _____	STATE _____ ZIP _____	
	ADDRESS _____		HOW LONG?
CITY _____	STATE _____ ZIP _____		
NOTIFY IN CASE OF AN EMERGENCY			
NAME _____		ADDRESS _____	CITY _____ STATE _____
PHONE () _____		RELATIONSHIP _____	
NAME _____		ADDRESS _____	CITY _____ STATE _____
PHONE () _____		RELATIONSHIP _____	

EMPLOYMENT HISTORY

SHOW ALL EMPLOYMENT FOR THE PAST 10 YEARS

PRESENT EMPLOYER	
FROM	Name _____ Phone _____ Position _____ Address _____ Duties _____
TO	City _____ State _____ Type of Vehicle Driven _____ Reason for Leaving _____
	Supervisor's name _____ Title _____
NEXT PREVIOUS	
FROM	Name _____ Phone _____ Position _____ Address _____ Duties _____
TO	City _____ State _____ Type of Vehicle Driven _____ Reason for Leaving _____
	Supervisor's name _____ Title _____

EMPLOYMENT HISTORY CONTINUED

NEXT PREVIOUS			
FROM	Name _____	Phone _____	Position _____
	Address _____	Duties _____	
TO	City _____	State _____	Type of Vehicle Driven _____
	Reason for Leaving _____		
	Supervisor's name _____		Title _____
NEXT PREVIOUS			
FROM	Name _____	Phone _____	Position _____
	Address _____	Duties _____	
TO	City _____	State _____	Type of Vehicle Driven _____
	Reason for Leaving _____		
	Supervisor's name _____		Title _____

EDUCATION

Circle the last grade completed 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4

Truck Driving School _____ Location _____ Date _____

Trade School _____ Type of Course _____

DRIVING EXPERIENCE

CLASS OF EQUIPMENT	AREA OF OPERATION	DATES		APPROXIMATE # OF MILES
		TO	FROM	
Straight Truck				
Tractor & Semi Trailer				
Other				

LIST ALL AWARDS OR SPECIAL TRAINING RECEIVED	AWARD OR COURSE	ISSUED BY	WHEN

YOU MUST BE LICENSED IN THE STATE OF YOUR LEGAL RESIDENCE

List all licenses held in the past 10 years or to age 18	STATE	LISCENSE NO	TYPE/CLASS	ISSUE DATE	EXPIRATION DATE
CDL Endorsements	Doubles Triples Tanker Hazmat				
LIST ANY RESTRICTIONS					

LIST ALL ACCIDENTS FOR THE PAST THREE YEARS

DATE OF ACCIDENT	CITY AND STATE	NATURE OF ACCIDENT (HEAD-ON, REAR END, OVERTURN, ECT.)	AMOUNT OF LOSS	NUMBER INJURED	FATALITIES

BACKGROUND QUESTIONS

<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you been convicted of a felony?
		Arrest Date: _____ Conviction Date: _____ City/State of Conviction: _____
		What were the charges? _____
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you been convicted for use of alcohol?
		If Yes, where: _____ When: _____
		Was a vehicle involved? <input type="checkbox"/> YES <input type="checkbox"/> NO Type of Vehicle: <input type="checkbox"/> Personal <input type="checkbox"/> Commercial
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Will you take an alcohol/drug screen breath/urine test for drugs, alcohol or or controlled substances?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you been convicted for use or possession of drugs or controlled substances?
		If Yes, where: _____ When: _____
		Was a vehicle involved? <input type="checkbox"/> YES <input type="checkbox"/> NO Type of Vehicle: <input type="checkbox"/> Personal <input type="checkbox"/> Commercial
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you ever served a prison term?
		If Yes, where: _____ When: _____
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you ever been under court assigned supervision, probation or parole?
		If Yes, please explain: _____
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Are you currently involved in any incomplete court action?
		If yes the nature of the action and location of the court: _____
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you ever worked for an Allied Agent? If yes, Agent Name: _____
		Agent Location: _____ In what Capacity: _____
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you ever been denied a license, permit or privilege to operate a motor vehicle?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Is your license to drive suspended or revoked at this time, in any state?
		If yes, where, when and why: _____
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Has any license, permit or privilege ever been suspended or revoked?
		If yes, where, when and why: _____
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Is your driving privilege limited in any way such as probation, area of operation, limitation of hours, ect., at this time?
		If yes, why? _____
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Are you a Citizen of the United States? If not a US citizen do you have an entry permit which allows you to work in the United States?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Can you read, speak and write English?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Are you familiar with D.O.T. Motor Carrier Safety Regulations?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Do you agree to follow them?

MILITARY SERVICE

<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you ever served in the United States Military?
		If yes, which branch? _____ From _____ To _____
		What were your duties? _____

DISCLAIMER/SIGNATURE

 (Print Name) hereby authorize Quincy Storage & Transfer, an agent of Allied Van Lines, to conduct a thorough check of my past employment, education, activities, references, and criminal history. I authorize all persons who may have information relevant to this check to disclose it to Quincy Storage & Transfer or its agents, and I release from liability all persons, companies and corporations disclosing such information. I hereby further authorize that a photocopy and/or facsimile copy of this authorization may be considered valid as an original.

I disclaim any claim, right or remedy against, and release from liability, Quincy Storage & Transfer its employees, officers and directors, whether on the grounds of right of privacy, defamation, action taken in reliance on such information or otherwise, whether such information is correct or mistaken as long as Quincy Storage & Transfer acts in good faith.

My agreement to an execution of this release was made voluntarily. I hereby authorize Quincy Storage & Transfer, to release to Allied Van Lines and/or an agent of Allied Van Lines a copy of my background information. I also authorize Allied Van Lines to research my driving record in any state.

APPLICANT SIGNATURE _____

DATE _____