



H.O. Wolding, Inc.®
9642 Western Way
PO Box 217
Amherst, WI 54406-0217
(800) 950-0054

Fax/Email Form
Fax- **(715) 824-2942**
Email- **Truck@wolding.com**

Company Driver Short Application

Please print, in ink, in your own handwriting. H.O. Wolding, Inc. is an equal opportunity employer.

Legal Name: _____
(Last) (First) (MI)

Present address:

(Address) (City) (State) (Zip) (County)

Date of Birth (mo/day/yr): _____ Home Phone: _____ Mobile Phone: _____

E-mail address (if applicable): _____

Driver License Number: _____ State _____ Commercial Drivers License? Yes No

MOTOR VEHICLE RECORD:

Has your license ever been suspended or revoked?	No	Yes	Date (mo/yr) _____
Have you ever been convicted of driving with a suspended or revoked license?	No	Yes	Date (mo/yr) _____
Have you ever been convicted for alcohol or drug related offenses while driving?	No	Yes	Date (mo/yr) _____
Have you ever been convicted of reckless or careless driving?	No	Yes	Date (mo/yr) _____
Do you have any pending charges?	No	Yes	

ACCIDENTS/INCIDENT: Number of accidents/incidents in the last 5 years _____

TRAFFIC CONVICTIONS: Number of convictions in the last 5 years: _____

CRIMINAL RECORD: Have you **ever** been convicted or deferred of any criminal charges or have charges pending? Yes No

If yes, please explain

DRIVING SCHOOL GRADUATE? Yes No Graduation Date: _____

Name of school _____ City/State _____

EMPLOYMENT HISTORY:

Number of different employers you worked for in the past 3 years? _____

Any unemployment time in the past 3 years? Yes No If yes, how many **months** in the past 3 years? _____

Were you terminated from any jobs in the past 3 years? Yes No If yes, please explain: _____

I certify by my signature that all information in this pre-qualification form is true and complete to the best of my knowledge.

Print Name: _____ Signature: _____ Date: _____