

X Endorsement: Yes ___ No ___

TWIC: Yes ___ No ___

Other: _____

JANUARY 2023



333 N. Rivershire Drive, Suite 265
Conroe, TX 77304

Phone: (936) 756-9962 • Fax: (936) 756-9977

COMMERCIAL DRIVER APPLICATION

Date of Application: _____

Hire Date: _____

Name: _____
FIRST MIDDLE LAST

Address: _____
STREET CITY STATE ZIP CODE

Date of Birth: _____ Social Security No.: _____ - _____ - _____

Email Address: _____

ADDRESS COVERING THE PAST THREE (3) YEARS:

_____ How Long? _____
STREET CITY STATE ZIP CODE

_____ How Long? _____
STREET CITY STATE ZIP CODE

_____ How Long? _____
STREET CITY STATE ZIP CODE

(Attach sheet if more space is needed)

Cell Phone: _____ Other: _____

Emergency Contact: _____
Address: _____
Phone: _____ Other: _____

Have you ever worked for CW Transport before? _____ If so, where? _____

Date: From _____ to _____ Rate of Pay: \$ _____ Position: _____

Reason for Leaving: _____

Are you now employed? _____ If not, how long since leaving last employment: _____

Who referred you? _____

Rate of new pay expected: \$ _____

Driver License(s)	State	License No.	Type	Expiration Date

Class of Equipment	Type of Equipment (Van, Tank, Flat, etc.)	Dates		Approximately No. of Miles (Total)
		From	To	
Straight Truck				
Tractor & Semi Trailer				
Tractor – Two Trailers				
Other				

List all states operated in for the last five (5) years: _____

Accident Dates	Nature of Accident	Fatalities	Injuries
Last Accident			
Next Previous			
Next Previous			

Traffic Convictions & forfeitures for the past three (3) years (other than parking violations):

Circle One

Date	Violation	State	CMV	
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No

THIS SECTION IS TO BE COMPLETED BY THE EMPLOYER:

Application received by:

Application reviewed for completeness by:

Name

Name

Title

Date

Title

Date

SIGNIFICANT DATES:

Date of Hire (DOH):

Time & Date of Pre-Employment CST (Previous Employer Information):

Time & Date of Pre-Employment CST Results Received:

Date first used in Safety Sensitive Position:

Date of Termination:

**MOTOR VEHICLE
DRIVER'S CERTIFICATION
OF VIOLATIONS**

I certify that the following is a true and complete list of traffic violations (other than parking violations) for which I have been convicted or forfeited bond or collateral during the past **12 months**.

Date	Offense	Location	Type of Vehicle
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Date of Certification)

(Driver's Signature)

CW TRANSPORT, LLC

(Motor Carrier's Name)

333 N. Rivershire Dr., #265, Conroe, TX 77304

(Motor Carrier's Address)

(Reviewed by: Signature)

(Title)

U.S. DEPARTMENT OF TRANSPORTATION
MOTOR CARRIER SAFETY PROGRAM
ANNUAL REVIEW OF DRIVING RECORD
(49 CFR 391.25)

Name of Motor Carrier: **CW TRANSPORT, LLC**

(Name of Driver)

(Social Security Number)

This day I reviewed the driving record of the above-named driver in accordance with CFR 391.25 of the Motor Carrier Safety Regulations. I considered any evidence that the driver has violated applicable provisions of the MCS Regulations and the Hazardous Materials Regulations. I considered the driver's accident record and any evidence that he/she has violated laws governing the operation of motor vehicles, and gave great weight to violations, such as speeding, reckless driving and operation while under the influence of alcohol or drugs, that indicate that the driver has exhibited a disregard for the safety of the public. Having done this, I find that

- The driver meets the minimum requirements for safe driving, or
- The driver is disqualified to drive a motor vehicle pursuant to CFR 391.15

Date of Review

Reviewed by: Signature & Title



BACKGROUND REPORT DISCLOSURE

In the interest of maintaining the safety and security of our customers, employees and property, *CW Transport LLC (WSS)* may order a "consumer report" (a background report) or "investigative consumer report" on you in connection with your employment application or contract, and if you are hired, or if you already work for the Company, may order additional background reports on you.

The background check company, KRESS Employment Screening will prepare the background report for the Company. KRESS Employment Screening is located at 13105 NW Freeway Suite 1050, Houston, TX 77040, and can be reached at 888-636-3693 or at their internet website address www.kressinc.com.

The background report may contain information concerning your character, general reputation, personal characteristics, mode of living, and credit standing. The types of information that may be ordered include but are not limited to: social security number verification; criminal, public, educational, and as appropriate, driving records checks; verification of prior employment; reference, licensing and certification checks; credit reports; and drug testing results. The information may be obtained from private and public record sources, including personal interviews with your associates, friends, and neighbors. (An "investigative consumer report" is a background report that includes information from such personal interviews, except in California where that term means any background report that is not a credit report.) The nature and scope of the most common form of investigative consumer report is an investigation into your education and/or employment history conducted by KRESS Employment Screening or another outside organization.

You may request more information about the nature and scope of an investigative consumer report by contacting the Company. You may request a copy of this report from the Company or KRESS Employment Screening using the contact information listed above.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will find these rights summarized on A Summary of Your Rights Under the Fair Credit Reporting Act, A Summary of Rights Under California Civil Code

STATE LAW NOTICES

If you live or work for the Company in the states listed below, please note the following:

Authorization below. **California Only:** Pursuant to Section 1786.22 of the California Civil Code, you may view the file that KRESS Employment Screening has for you, and order a copy of the file, upon submitting proper identification by either coming to their offices, during normal business hours and on reasonable notice, or by certified mail or mail. You may also ask for a file-summary by telephone. KRESS Employment Screening can answer questions about information in your file, including any coded information, if you come in person, another person can come with you, so long as that person can show proper identification.

MAINE: You have the right, upon request, to be informed of whether an investigative background report was requested, and if one was requested, the name, address, and telephone number of the nearest unit designated to handle inquiries of each background reporting agency issuing an investigative consumer report. You also have the right, under Maine law, to request and promptly receive from all such agencies copies of such reports.

MASSACHUSETTS / NEW JERSEY: If you submit a request to us in writing, you have the right to know whether the Company ordered an investigative consumer report from KRESS Employment Screening. You may inspect and order a free copy of the report by contacting KRESS Employment Screening.

NEW YORK: If you submit a request to us in writing, you have the right to know whether the Company ordered an investigative consumer report from KRESS Employment Screening, and you will be provided with the name and address of KRESS Employment Screening. You may inspect and order a free copy of the report by contacting KRESS Employment Screening. By signing below, you certify that you have received a copy of New York Correction Law 23-A, that you have read and fully understand this release, and that prior to signing, you were given opportunity to ask questions and have those questions answered to your satisfaction.

WASHINGTON STATE: If the Company requests an investigative background report, you have the right, upon written request made within a reasonable period of time after your receipt of this disclosure, to receive from the Company a complete and accurate disclosure of the nature and scope of the investigative consumer report requested by the Company. You also have the right to ask KRESS Employment Screening for a written summary of your rights under the Washington Fair Credit Reporting Act.

CREDIT REPORTS:

CONNECTICUT / HAWAII / MARYLAND / OREGON / WASHINGTON STATE: I further understand that the Company will not obtain information about my credit worthiness, credit standing or credit capacity unless the information is (i) required by law, (ii) I am seeking employment with a financial institution (Connecticut only), (iii) I am seeking employment with a financial institution that accepts deposits that are insured by a federal agency, or an affiliate or subsidiary of the financial institution or a credit union guaranty corporation that is approved by the Maryland commissioner of Financial Regulation or an entity or an affiliate of the entity that is registered as an investment advisor with the United States Securities and Exchange Commission (Maryland only), (iv) I am seeking employment as a covered police or peace officer with a federally insured bank or credit union (Oregon only), (v) the Company reasonably believes I have engaged in specific activity that constitutes a violation of law related to my employment (Connecticut only), or (vi) is substantially job related, as disclosed below.

ILLINOIS: I further understand that the Company will not obtain information about my credit history unless at least one of the following circumstances is present: (1) State or federal law requires bonding or other security covering an individual holding the position. (2) The duties of the position include custody of or unsupervised access to cash or marketable assets valued at \$2500 or more. (3) The duties of the position include signatory power over business assets of \$100 or more per transaction. (4) The position is a managerial position which involves setting the direction or control of the business. (5) The position involves access to person or confidential information, financial information, trade secrets, or State or National security information. (6) The position meets criteria in administrative rules, if any, that the US Department of Labor or the Illinois Department of Labor has promulgated to establish the circumstances in which a credit history is a bona fide occupational requirement. (7) The employee's or applicant's credit history is otherwise required by or exempt under federal or State law.

ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK

I acknowledge receipt of the **Background Check Disclosure, A Summary of Your Rights Under the Fair Credit Reporting Act, A Summary of Your Rights Under California Civil Code 1786.22**, and the **New York Correction Law 23-A** and certify that I have read and understand all of those documents provided to me by the Company. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment or contract, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, local, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by KRESS Employment Screening, 13105 NW Freeway #1050, Houston, TX 77040, 888-636-3693, www.kressinc.com, or another outside organization acting on behalf of the Company, and/or the Company itself.

I understand that my signature now and throughout this process will be binding. Additionally, notices, documents, and communications may be provided electronically and will meet the requirements set forth under Federal and/or State law, as permitted by law. I agree that a facsimile ("fax"), electronic or printout of this authorization may be accepted with the same authority as the original.

I understand that by signing my name below, that I am signing the Authorization form directing the background report as described above, the information contained in my employment application or contract, or otherwise disclosed by me before, or during, my employment or contract, if any, may be used for the purpose of obtaining background reports and/or investigative background reports, and I certify that:

- I have received the Disclosure Regarding Consumer and/or Investigative Report, and have received and reviewed the Summary of Your Rights Under the Fair Credit Reporting Act. I have also received and reviewed A Summary of Your Rights Under the Provisions of California Civil Code §1786.22 and the New York Correction Law 23-A.
 - **Yes**
 - **No**

- For California, Oklahoma, or Minnesota employees and applicants: Please check the appropriate box to indicate if you would like to receive a copy of your consumer report free of charge.
 - **Yes**
 - **No**

Company Requesting Background: *CW Transport LLC (WSS) - Conroe*

Printed Name of Applicant/Contractor: _____

Signature: _____ Date Authorized: _____

Services Request Form

Client: CW Transport LLC (WSS) - Conroe Requestor: _____

Phone Number: _____ E-Mail: _____

Income Over \$75K? Yes No

Services Requested:

DOT Annual Package DOT Pre-Employment Package

To Be Filled Out by Applicant/Contractor

Last Name: _____ First Name: _____ Middle Name: _____

Additional Last Names Used: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____ State: _____ Phone Number: _____

E-Mail Address: _____

7 Year Address History (Required)

Current Address: _____

City: _____ State: _____ Postal Code: _____ Country: _____

Previous Address: _____

City: _____ State: _____ Postal Code: _____ Country: _____

Previous Address: _____

City: _____ State: _____ Postal Code: _____ Country: _____

5 Year Employment History (Required)

Employer: _____ City: _____ State: _____

Phone# _____ Position: _____ Dates: _____

Employer: _____ City: _____ State: _____

Phone# _____ Position: _____ Dates: _____

Employer: _____ City: _____ State: _____

Phone# _____ Position: _____ Dates: _____

A Summary of Your Rights under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20006.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment - or to take another adverse action against you - must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need - usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567- 8688.

- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

- **Identity theft victims and active duty military personnel have additional rights.** For more

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:

CONTACT:

- | | |
|--|---|
| <p>1. a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the Bureau:</p> <p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks.</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and insured state branches of foreign banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations.</p> <p>d. Federal Credit Unions.</p> <p>3. Air carriers.</p> <p>4. Creditors Subject to Surface Transportation Board.</p> <p>5. Creditors Subject to Packers and Stockyards Act.</p> <p>6. Small Business Investment Companies.</p> <p>7. Brokers and Dealers.</p> <p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations.</p> <p>9. Retailers, Finance Companies, and All Other Creditors not listed above.</p> | <p>a. Bureau of Consumer Financial Protection
1700 G Street NW,
Washington, DC 20006.</p> <p>b. Federal Trade Commission: Consumer Response Center - FCRA
Washington, DC 20580.
(877) 382-4357</p> <p>a. Office of the Comptroller of the Currency
Customer Assistance Group
1301 McKinney Street, Suite 3450,
Houston, TX 77010-9050.</p> <p>b. Federal Reserve Consumer Help Center
P.O. Box 1200,
Minneapolis, MN 55480.</p> <p>c. FDIC Consumer Response Center
1100 Walnut Street, Box #11,
Kansas City, MO 64106.</p> <p>d. National Credit Union Administration
Office of Consumer Protection (OCP)
Division of Consumer Compliance and Outreach (DCCO)
1775 Duke Street,

Asst. General Counsel for Aviation Enforcement & Proceedings
Department of Transportation
400 Seventh Street SW,
Washington, DC 20590.</p> <p>Office of Proceedings, Surface Transportation Board
Department of Transportation
1925 K Street NW,
Washington, DC 20423.</p> <p>Nearest Packers and Stockyards Administration area supervisor.</p> <p>Associate Deputy Administrator for Capital Access
United States Small Business Administration
406 Third Street, SW, 8th Floor
Washington, DC 20416</p> <p>Securities and Exchange Commission
100 F St NE,
Washington, DC 20549.</p> <p>Farm Credit Administration
1501 Farm Credit Drive,
McLean, VA 22102-5090.</p> <p>FTC Regional Office for region in which the creditor operates
or Federal Trade Commission: Consumer Response Center - FCRA
Washington, DC 20580.
(877) 382-4357</p> |
|--|---|

A Summary of Your Rights under California Civil Code 1786.22

- (a) An investigative consumer reporting agency shall supply files and information required under Section 1786.10 during normal business hours and on reasonable notice.
- (b) Files maintained on a consumer shall be made available for the consumer's visual inspection, as follows:
- In person, if he appears in person and furnishes proper identification. A copy of his file shall also be available to the consumer for a fee not to exceed the actual costs of duplication services provided.
 - By certified mail, if he makes a written request, with proper identification, for copies to be sent to a specified addressee. Investigative consumer reporting agencies complying with requests for certified mailings under this section shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the investigative consumer reporting agencies.
 - A summary of all information contained in files on a consumer and required to be provided by Section 1786.10 shall be provided by telephone, if the consumer has made a written request, with proper identification for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to the consumer.
- (c) The term "proper identification" as used in subdivision (b) shall mean that information generally deemed sufficient to identify a person. Such information includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if the consumer is unable to reasonably identify himself with the information described above, may an investigative consumer reporting agency require additional information concerning the consumer's employment and personal or family history in order to verify his identity.
- (d) The investigative consumer reporting agency shall provide trained personnel to explain to the consumer any information furnished him pursuant to Section 1786.10.
- (e) The investigative consumer reporting agency shall provide a written explanation of any coded information contained in files maintained on a consumer. This written explanation shall be distributed whenever a file is provided to a consumer for visual inspection as required under Section 1786.22.
- (f) The consumer shall be permitted to be accompanied by one other person of his choosing, who shall furnish reasonable identification. An investigative consumer reporting agency may require the consumer to furnish a written statement granting permission to the consumer reporting agency to discuss the consumer's file in such person's presence.

**NEW YORK CORRECTION LAW
ARTICLE 23-A**

LICENSURE AND EMPLOYMENT OF PERSONS PREVIOUSLY CONVICTED OF ONE OR MORE CRIMINAL

Sections

750. Definitions

751. Applicability

752. Unfair discrimination against persons previously convicted of one or more criminal offenses prohibited

753. Factors to be considered concerning a previous criminal conviction; presumption

754. Written statement upon denial of license or employment

755. Enforcement

§750. Definitions.

For the purposes of this article, the following terms shall have the following meanings:

1. "Public agency" means the state or any local subdivision thereof, or any state or local department, agency, board or commission.
2. "Private employer" means any person, company, corporation, labor organization or association which employs ten or more persons.
3. "Direct relationship" means that the nature of criminal conduct for which the person was convicted has a direct bearing on his fitness or ability to perform one or more of the duties or responsibilities necessarily related to the license, opportunity, or job in question.
4. "License" means any certificate, license, permit or grant of permission required by the laws of this state, its political subdivisions or instrumentalities as a condition for the lawful practice of any occupation, employment, trade, vocation, business, or profession. Provided, however, that "license" shall not, for the purposes of this article, include any license or permit to own, possess, carry, or fire any explosive, pistol, handgun, rifle, shotgun, or other firearm.
5. "Employment" means any occupation, vocation or employment, or any form of vocational or educational training. Provided, however, that "employment" shall not, for the purposes of this article, include membership in any law enforcement agency.

§751. Applicability.

The provisions of this article shall apply to any application by any person for a license or employment at any public or private employer, who has previously been convicted of one or more criminal offenses in this state or in any other jurisdiction, and to any license or employment held by any person whose conviction of one or more criminal offenses in this state or in any other jurisdiction preceded such employment or granting of a license, except where a mandatory forfeiture, disability or bar to employment is imposed by law, and has not been removed by an executive pardon, certificate of relief from disabilities or certificate of good conduct. Nothing in this article shall be construed to affect any right an employer may have with respect to an intentional misrepresentation in connection with an application for employment made by a prospective employee or previously made by a current employee.

§752. Unfair discrimination against persons previously convicted of one or more criminal offenses prohibited.

No application for any license or employment, and no employment or license held by an individual, to which the provisions of this article are applicable, shall be denied or acted upon adversely by reason of the individual's having been previously convicted of one or more criminal offenses, or by reason of a finding of lack of "good moral character" when such finding is based upon the fact that the individual has previously been convicted of one or more criminal offenses, unless:

1. There is a direct relationship between one or more of the previous criminal offenses and the specific license or employment sought or held by the individual; or

§753. Factors to be considered concerning a previous criminal conviction; presumption.

1. In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall consider the following factors:
 - a) The public policy of this state, as expressed in this act, to encourage the licensure and employment of persons previously convicted of one or more criminal offenses.
 - b) The specific duties and responsibilities necessarily related to the license or employment sought or held by the person.
 - c) The bearing, if any, the criminal offense or offenses for which the person was previously convicted will have on his fitness or ability to perform one or more such duties or responsibilities.
 - d) The time which has elapsed since the occurrence of the criminal offense or offenses.
 - e) The age of the person at the time of occurrence of the criminal offense or offenses.
 - f) The seriousness of the offense or offenses.
 - g) Any information produced by the person, or produced on his behalf, in regard to his rehabilitation and good conduct.
 - h) The legitimate interest of the public agency or private employer in protecting property, and the safety and welfare of specific individuals or the general public.

2. In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall also give consideration to a certificate of relief from disabilities or a certificate of good conduct issued to the applicant, which certificate shall create a presumption of rehabilitation in regard to the offense or offenses specified therein.

§754. Written statement upon denial of license or employment.

At the request of any person previously convicted of one or more criminal offenses who has been denied a license or employment, a public agency or private employer shall provide, within thirty days of a request, a written statement setting forth the reasons for such denial.

§755. Enforcement.

1. In relation to actions by public agencies, the provisions of this article shall be enforceable by a proceeding brought pursuant to article seventy-eight of the civil practice law and rules.

2. In relation to actions by private employers, the provisions of this article shall be enforceable by the division of human rights

**Release of Information Form – 49 CFR Part 40 Drug and Alcohol Testing
ONE FORM FOR EACH EMPLOYER IN THE LAST 3 YEARS or 36 Months**

Section I. To be completed by the new employer, signed by the employee, and transmitted to the previous employer:

Employee Name (please print): _____ SSN: _____

I hereby authorize release of information from my Department of Transportation regulated drug and alcohol testing records by my previous employer, listed in Section I-B, to the employer, or its authorized agent listed in Section I-A. This release is in accordance with DOT Regulation 49 CFR Part 40, Section 40.25. I understand that information to be released in Section II-A by my previous employer, is limited to the following DOT regulated testing items:

1. Alcohol tests with a result of 0.04 or higher;
2. Verified positive drug tests;
3. Refusals to be tested;
4. Other violations of DOT agency drug and alcohol testing regulations;
5. Information obtained from previous employers of a drug and alcohol rule violation;
6. Documentation, if any, of completion of the return-to-duty process following a rule violation.

Employee Signature: _____ Date: _____

I-A. New Employer (please print):

Company Name: CW Transport LLC

Address: 333N Rivershire Drive, Suite 265, Conroe, Texas 77304

DER: Bryan Norvell | 936 756 9970

Authorized Agent of New Employer: Workplace Safety Screenings and Kress, Inc.

I-B. Previous Employer (please print):

Employment Dates: Start Date: _____ End Date: _____

Company Name: _____

Street Address: _____ **City:** _____ **State:** _____ **Zip:** _____

DER: _____ **Phone:** _____ **Fax:** _____

Section II. To be completed by the previous employer and transmitted to new employer's agent:

II-A. In the three years prior to the date of the employee's signature (in Section I), for DOT-regulated testing:

1. Did the employee have alcohol tests with a result of 0.04 or higher?..... YES NO
2. Did the employee have verified positive drug tests?..... YES NO
3. Did the employee refuse to be tested? YES NO
4. Did the employee have other violations of DOT agency drug and alcohol testing regulations? YES NO
5. Did a previous employer report a drug and alcohol rule violation to you? YES NO
6. If you answered "YES" to any of the above items, did the employee completed the return-to duty process? N/A YES NO

NOTE: If you answered "yes" to item 5, you must provide the previous employer's report. If you answered "yes" to item 6, you must also transmit the appropriate return-to-duty documentation (e.g., SAP report's, follow-up testing record, etc.).

II-B. Person providing info in Section II-A

Date Completed: _____

Signature: _____ **Printed Name:** _____

Title: _____ **Phone:** _____

THE BELOW DISCLOSURE AND AUTHORIZATION LANGUAGE IS FOR MANDATORY USE BY ALL ACCOUNT HOLDERS

IMPORTANT DISCLOSURE

REGARDING BACKGROUND REPORTS FROM THE *PSP Online Service*

In connection with your application for employment with CW Transport, LLC ("Prospective Employer"), Prospective Employer, its employees, agents or contractors may obtain one or more reports regarding your driving, and safety inspection history from the Federal Motor Carrier Safety Administration (FMCSA).

When the application for employment is submitted in person, if the Prospective Employer uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, the Prospective Employer will provide you with a copy of the report upon which its decision was based and a written summary of your rights under the Fair Credit Reporting Act before taking any final adverse action. If any final adverse action is taken against you based upon your driving history or safety report, the Prospective Employer will notify you that the action has been taken and that the action was based in part or in whole on this report.

When the application for employment is submitted by mail, telephone, computer, or other similar means, if the Prospective Employer uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, the Prospective Employer must provide you within three business days of taking adverse action oral, written or electronic notification: that adverse action has been taken based in whole or in part on information obtained from FMCSA; the name, address, and the toll free telephone number of FMCSA; that the FMCSA did not make the decision to take the adverse action and is unable to provide you the specific reasons why the adverse action was taken; and that you may, upon providing proper identification, request a free copy of the report and may dispute with the FMCSA the accuracy or completeness of any information or report. If you request a copy of a driver record from the Prospective Employer who procured the report, then, within 3 business days of receiving your request, together with proper identification, the Prospective Employer must send or provide to you a copy of your report and a summary of your rights under the Fair Credit Reporting Act.

Neither the Prospective Employer nor the FMCSA contractor supplying the crash and safety information has the capability to correct any safety data that appears to be incorrect. You may challenge the accuracy of the data by submitting a request to <https://dataqs.fmcsa.dot.gov>. If you challenge crash or inspection information reported by a State, FMCSA cannot change or correct this data. Your request will be forwarded by the DataQs system to the appropriate State for adjudication.

Any crash or inspection in which you were involved will display on your PSP report. Since the PSP report does not report, or assign, or imply fault, it will include all Commercial Motor Vehicle (CMV) crashes where you were a driver or co-driver and where those crashes were reported to FMCSA, regardless of fault. Similarly, all inspections, with or without violations, appear on the PSP report. State citations associated with Federal Motor Carrier Safety Regulations (FMCSR) violations that have been adjudicated by a court of law will also appear, and remain, on a PSP report.

The Prospective Employer cannot obtain background reports from FMCSA without your authorization.

AUTHORIZATION

If you agree that the Prospective Employer may obtain such background reports, please read the following and sign below:

I authorize CW Transport, LLC ("Prospective Employer") to access the FMCSA Pre-Employment Screening Program (PSP) system to seek information regarding my commercial driving safety record and information regarding my safety inspection history. I understand that I am authorizing the release of safety performance information including crash data from the previous five (5) years and inspection history from the previous three (3) years. I understand and acknowledge that this release of information may assist the Prospective Employer to make a determination regarding my suitability as an employee.

I further understand that neither the Prospective Employer nor the FMCSA contractor supplying the crash and safety information has the capability to correct any safety data that appears to be incorrect. I understand I may challenge the accuracy of the data by submitting a request to <https://dataqs.fmcsa.dot.gov>. If I challenge crash or inspection information reported by a State, FMCSA cannot change or correct this data. I understand my request will be forwarded by the DataQs system to the appropriate State for adjudication.

I understand that any crash or inspection in which I was involved will display on my PSP report. Since the PSP report does not report, or assign, or imply fault, I acknowledge it will include all CMV crashes where I was a driver or co-driver and where those crashes were reported to FMCSA, regardless of fault. Similarly, I understand all inspections, with or without violations, will appear on my PSP report, and State citations associated with FMCSR violations that have been adjudicated by a court of law will also appear, and remain, on my PSP report.

I have read the above Disclosure Regarding Background Reports provided to me by Prospective Employer and I understand that if I sign this Disclosure and Authorization, Prospective Employer may obtain a report of my crash and inspection history. I hereby authorize Prospective Employer and its employees, authorized agents, and/or affiliates to obtain the information authorized above.

Date: _____

Signature

Name (Please Print)

NOTICE: This form is made available to monthly account holders by NIC on behalf of the U.S. Department of Transportation, Federal Motor Carrier Safety Administration (FMCSA). Account holders are required by federal law to obtain an Applicant's written or electronic consent prior to accessing the Applicant's PSP report. Further, account holders are required by FMCSA to use the language contained in this Disclosure and Authorization form to obtain an Applicant's consent. The language must be used in whole, exactly as provided. Further, the language on this form must exist as one stand-alone document. The language may NOT be included with other consent forms or any other language.

NOTICE: The prospective employment concept referenced in this form contemplates the definition of "employee" contained at 49 C.F.R. 383.5.

LAST UPDATED 2/11/2016

General Consent for Limited Queries of the Federal Motor Carrier Safety Administration (FMCSA) Drug and Alcohol Clearinghouse

I, _____ hereby provide consent to CW Transport to conduct a limited query of the FMCSA Commercial Driver's Licensed Drug and Alcohol Clearinghouse (Clearinghouse) to determine whether drug or alcohol violation Information about me exists in the Clearinghouse.

Single Limited Query

Multiple Limited Queries for the duration of Employment

I understand that if the limited query conducted by CW Transport indicates that drug or alcohol violation information about me exists in the Clearinghouse, FMCSA will not disclose that information to CW Transport Inc without first obtaining additional specific consent from me.

I further understand that if I refused to provide consent for CW Transport to conduct a limited query of the Clearinghouse, CW Transport must prohibit me from performing safety-sensitive functions, including driving a commercial motor vehicle, as required by FMCSA's drug and alcohol program regulations.

Date Received

Employee Signature

Employee Print Name