AJ XPRESS LLC

DRIVER QUALIFICATION APPLICATION

Independent Contractor / Commercial Driver

AJX-HR-001 | VERSION 1.0

DOT 3813424 | MC 1377130

Semmes, Alabama | 251-709-9965 | services@ajxpressonline.com

Complete all sections. Use additional pages where necessary.

Applicant Instructions & Required Documents

Complete every applicable field. Incomplete applications may delay qualification.

Required Documents Checklist

- [ ] Valid Class A CDL (front and back)
- [ ] Current Medical Examiner's Certificate
- [ ] Social Security card or acceptable identity/work authorization document
- [ ] Motor Vehicle Record authorization
- [ ] PSP authorization
- [ ] FMCSA Drug & Alcohol Clearinghouse consent/query completion
- [ ] Ten-year employment history
- [ ] Three-year accident and violation history
- [ ] Road test certificate or accepted equivalent, if applicable
- [ ] Owner-operator documents: W-9, EIN, registration, title/lease, insurance certificate

Applicant Acknowledgment

I understand that providing false, incomplete, or misleading information may result in disqualification or termination of any agreement with AJ XPRESS LLC. Submission of this application does not guarantee qualification, employment, or the award of freight.

Applicant Initials _____ Date _____

Qualification Dashboard

AJ XPRESS internal use only

Requirement	Status	Date	Initials	Notes
Application received	☐			
Identity documents	☐			
CDL verified	☐			
Medical card verified	☐			
MVR reviewed	☐			
PSP reviewed	☐			
Clearinghouse query	☐			
Drug test result	☐			
Prior employer checks	☐			
Road test / equivalent	☐			
Insurance approval	☐			
Safety approval	☐			
Operations approval	☐			
Orientation complete	☐			
Final approval	☐			

Part 1 - Applicant Information

Personal Information

Legal First Name

Middle Name

Last Name

Suffix

Preferred Name

Date of Birth

Mobile Phone

Email Address

Current Street Address

City

State

ZIP Code

Years at Current Address

Emergency Contact

Contact Name

Relationship

Primary Phone

Alternate Phone

Emergency Contact Address

Part 2 - Driver Profile & Availability

Availability

Date Available

Current Location / Home Base

Preferred Operation

☐ OTR ☐ Regional ☐ Local ☐ Dedicated

Available Schedule

☐ Full-Time ☐ Weekends ☐ Nights ☐ Team Driving

General Qualification Questions

Are you legally authorized to work in the United States?	☐ Yes	☐ No
Can you perform the essential duties of the driving position with or without reasonable accommodation?	☐ Yes	☐ No
Are you at least 21 years old?	☐ Yes	☐ No
Have you ever been denied a license, permit, or privilege to operate a motor vehicle?	☐ Yes	☐ No
Has any license, permit, or driving privilege ever been suspended or revoked?	☐ Yes	☐ No
Are you currently disqualified from operating a commercial motor vehicle?	☐ Yes	☐ No
Have you ever been convicted of a felony? (A conviction is not an automatic disqualification.)	☐ Yes	☐ No

Explanation for any Yes response above

Part 3 - CDL, Medical Certificate & Endorsements

Commercial Driver License

CDL Number

Issuing State

Class

Expiration Date

Restrictions

Endorsements

☐ I certify that my CDL is current and valid.

Medical Examiner's Certificate

Medical Examiner Name

National Registry Number

Certificate Issue Date

Certificate Expiration Date

Credentials & Endorsements

☐ Yes	☐ No	TWIC Card	☐ Yes	☐ No	Hazardous Materials
☐ Yes	☐ No	Tanker	☐ Yes	☐ No	Doubles/Triples
☐ Yes	☐ No	Passenger	☐ Yes	☐ No	School Bus
☐ Yes	☐ No	Passport			

Additional credential details or expiration dates

Part 4 - Commercial Driving Experience

Equipment Experience

Straight Truck	Years		Approx. Miles	
Tractor-Semitrailer	Years		Approx. Miles	
Doubles	Years		Approx. Miles	
Dry Van	Years		Approx. Miles	
Refrigerated	Years		Approx. Miles	
Flatbed	Years		Approx. Miles	
Step Deck	Years		Approx. Miles	
Tanker	Years		Approx. Miles	
Intermodal / Container	Years		Approx. Miles	

Freight & Operating Experience

- ☐ General freight
- ☐ Automotive
- ☐ Machinery
- ☐ Nursery / agricultural
- ☐ Hazardous materials
- ☐ Retail / e-commerce
- ☐ Building materials
- ☐ Food products
- ☐ Expedited

States/regions operated in

Approximate total commercial driving miles

Part 5 - Technology, Operational Skills & Safety Training

Technology Experience

- [ ] Samsara
- [ ] Motive / KeepTruckin
- [ ] Qualcomm / Omnitracs
- [ ] Amazon Relay
- [ ] DAT
- [ ] Truckstop
- [ ] ELD mobile apps
- [ ] Electronic document scanning
- [ ] Navigation / routing apps

Operational Skills

- [ ] Pre-trip and post-trip inspections
- [ ] Hours-of-service compliance
- [ ] Cargo securement
- [ ] ELD troubleshooting
- [ ] Trip planning
- [ ] Fuel optimization
- [ ] Customer communication
- [ ] Proof-of-delivery procedures
- [ ] Accident scene procedures
- [ ] Adverse weather driving

Safety Training / Recognition

- [ ] Defensive driving
- [ ] Smith System
- [ ] Cargo securement
- [ ] HazMat
- [ ] OSHA
- [ ] Winter driving
- [ ] Mountain driving
- [ ] Military driving
- [ ] Million-mile award
- [ ] Other safety award

Training, awards, or relevant details

Part 6 - Ten-Year Employment History

List all employers and periods of self-employment for the previous 10 years. For commercial driving positions, provide sufficient information for AJ XPRESS to request safety performance and drug/alcohol information where required. Explain every period of unemployment or other gap.

☐ I authorize AJ XPRESS to contact the employers listed in this application.

Employment History - Employer 1

Company / Business Name

Position / Title

Street Address

City / State / ZIP

Company Phone

Supervisor / Contact

Contact Email

Start Date

End Date

Reason for Leaving

☐ DOT-regulated / safety-sensitive position

☐ Operated a commercial motor vehicle

Equipment operated

Freight / duties

☐ AJ XPRESS may contact this employer.

☐ Self-employed / owner-operator

Additional notes

Employment History - Employer 2

Company / Business Name

Position / Title

Street Address

City / State / ZIP

Company Phone

Supervisor / Contact

Contact Email

Start Date

End Date

Reason for Leaving

☐ DOT-regulated / safety-sensitive position

☐ Operated a commercial motor vehicle

Equipment operated

Freight / duties

☐ AJ XPRESS may contact this employer.

☐ Self-employed / owner-operator

Additional notes

Employment History - Employer 3

Company / Business Name

Position / Title

Street Address

City / State / ZIP

Company Phone

Supervisor / Contact

Contact Email

Start Date

End Date

Reason for Leaving

☐ DOT-regulated / safety-sensitive position

☐ Operated a commercial motor vehicle

Equipment operated

Freight / duties

☐ AJ XPRESS may contact this employer.

☐ Self-employed / owner-operator

Additional notes

Employment History - Employer 4

Company / Business Name

Position / Title

Street Address

City / State / ZIP

Company Phone

Supervisor / Contact

Contact Email

Start Date

End Date

Reason for Leaving

☐ DOT-regulated / safety-sensitive position

☐ Operated a commercial motor vehicle

Equipment operated

Freight / duties

☐ AJ XPRESS may contact this employer.

☐ Self-employed / owner-operator

Additional notes

Employment History - Employer 5

Company / Business Name

Position / Title

Street Address

City / State / ZIP

Company Phone

Supervisor / Contact

Contact Email

Start Date

End Date

Reason for Leaving

☐ DOT-regulated / safety-sensitive position

☐ Operated a commercial motor vehicle

Equipment operated

Freight / duties

☐ AJ XPRESS may contact this employer.

☐ Self-employed / owner-operator

Additional notes

Part 7 - Employment Gaps

Explain each period not covered by employment, self-employment, school, military service, or another verifiable activity during the ten-year history.

Gap 1

From

To

Reason / Activity

Gap 2

From

To

Reason / Activity

Gap 3

From

To

Reason / Activity

Gap 4

From

To

Reason / Activity

Gap 5

From

To

Reason / Activity

Part 8 - Accident History (Previous 3 Years)

List each accident involving any motor vehicle during the previous three years, regardless of fault. Attach additional pages if needed.

Accident 1

Date

Location

☐ Commercial vehicle ☐ Preventable ☐ Citation issued ☐ Injury

Fatalities

HazMat release ☐ Yes

Weather / road conditions

Description

Accident 2

Date

Location

☐ Commercial vehicle ☐ Preventable ☐ Citation issued ☐ Injury

Fatalities

HazMat release ☐ Yes

Weather / road conditions

Description

Accident 3

Date

Location

☐ Commercial vehicle ☐ Preventable ☐ Citation issued ☐ Injury

Fatalities

HazMat release ☐ Yes

Weather / road conditions

Description

Part 9 - Traffic Violations (Previous 3 Years)

List all traffic convictions and forfeitures other than parking violations during the previous three years.

Violation 1

Date

Location

Violation / Charge

Disposition / Penalty

☐ Commercial motor vehicle ☐ License suspended/revoked

Violation 2

Date

Location

Violation / Charge

Disposition / Penalty

☐ Commercial motor vehicle ☐ License suspended/revoked

Violation 3

Date

Location

Violation / Charge

Disposition / Penalty

☐ Commercial motor vehicle ☐ License suspended/revoked

Violation 4

Date

Location

Violation / Charge

Disposition / Penalty

☐ Commercial motor vehicle ☐ License suspended/revoked

Part 9 - Traffic Violations - Continued

Violation 5

Date

Location

Violation / Charge

Disposition / Penalty

☐ Commercial motor vehicle

☐ License suspended/revoked

Part 10 - Driving Record Disclosures

Have you tested positive for, or refused, a DOT drug or alcohol test within the previous three years?	☐ Yes	☐ No
Have you violated any DOT drug and alcohol testing regulation and not completed the required return-to-duty process?	☐ Yes	☐ No
Have you ever left the scene of an accident?	☐ Yes	☐ No
Have you ever been convicted of driving under the influence or driving while impaired?	☐ Yes	☐ No
Have you ever used a commercial motor vehicle in the commission of a felony?	☐ Yes	☐ No
Have you ever been disqualified from operating a commercial motor vehicle?	☐ Yes	☐ No
Are you subject to any out-of-service order or unresolved citation?	☐ Yes	☐ No

Explain every Yes response

Part 11 - Owner-Operator / Business Information

Business Information

Legal Business Name

DBA

Entity Type

EIN

USDOT Number

MC Number

Business Address

Equipment Information

Tractor Year / Make

Tractor Model

VIN

Unit Number

License Plate / State

Mileage

☐ Owned ☐ Financed ☐ Leased

Trailer information, if applicable

Part 12 - Insurance & Settlement Information

Insurance

Insurance Company

Agent / Contact

Policy Number

Expiration Date

Liability Limit

Cargo Limit

Insurance Agent Phone / Email

Settlement Preference

☐ ACH ☐ Paper Check ☐ Zelle ☐ Cash App

Bank / Financial Institution

Account Type

Routing Number

Account Number

For security, AJ XPRESS may require a voided check or bank letter before initiating ACH payments. Banking information should be handled and stored securely.

Part 13 - Authorizations and Releases

MVR Authorization

I authorize AJ XPRESS LLC and its agents to obtain and review my motor vehicle records for qualification, safety, insurance, and ongoing compliance purposes.

☐ I authorize / consent

Initials _____ Date _____

PSP Authorization

I authorize AJ XPRESS LLC to request my FMCSA Pre-Employment Screening Program report as permitted by law.

☐ I authorize / consent

Initials _____ Date _____

Previous Employer Release

I authorize current and former employers to release information concerning my employment, safety performance, accident history, and DOT drug and alcohol testing history as permitted by law.

☐ I authorize / consent

Initials _____ Date _____

Background Check Authorization

I authorize AJ XPRESS LLC and its agents to obtain lawful background information relevant to qualification and contracting decisions.

☐ I authorize / consent

Initials _____ Date _____

Drug & Alcohol Clearinghouse Consent

I understand that AJ XPRESS may conduct required FMCSA Drug and Alcohol Clearinghouse queries and that additional electronic consent may be required through the Clearinghouse.

☐ I authorize / consent

Initials _____ Date _____

Part 14 - Applicant Certification

I certify that the information in this application and all attachments is true, complete, and accurate. I understand that AJ XPRESS LLC may verify the information provided and may disqualify me or terminate any contractual relationship if material information is false, omitted, or misleading. I understand that qualification is subject to applicable federal and state requirements, insurance approval, safety review, and company standards. I acknowledge that I am applying as an independent contractor or commercial driver candidate and that this application does not itself create an employment relationship or guarantee freight, compensation, or a contract.

Applicant Full Legal Name

Applicant Signature

Date

Electronic Signature Consent

☐ I agree that my typed name/signature may be treated as my electronic signature.

Additional Applicant Comments

Part 15 - AJ XPRESS Internal Review

Do not complete this page as the applicant.

Recruiter Review

☐ Approved ☐ Conditional ☐ Not Approved Reviewer

Date Initials Notes

Safety Review

☐ Approved ☐ Conditional ☐ Not Approved Reviewer

Date Initials Notes

Insurance Review

☐ Approved ☐ Conditional ☐ Not Approved Reviewer

Date Initials Notes

Operations Review

☐ Approved ☐ Conditional ☐ Not Approved Reviewer

Date Initials Notes

Executive Approval

☐ Approved ☐ Conditional ☐ Not Approved Reviewer

Date Initials Notes

Part 16 - Orientation & Final Qualification

AJ XPRESS internal use only

☐ Independent contractor agreement executed	Date		Init.	
☐ W-9 received	Date		Init.	
☐ Insurance certificate received	Date		Init.	
☐ ELD assigned and tested	Date		Init.	
☐ Safety policies reviewed	Date		Init.	
☐ Hours-of-service reviewed	Date		Init.	
☐ Personal conveyance policy reviewed	Date		Init.	
☐ Accident reporting reviewed	Date		Init.	
☐ Cargo securement reviewed	Date		Init.	
☐ Dispatch and communication procedures reviewed	Date		Init.	
☐ Settlement process reviewed	Date		Init.	
☐ Driver issued unit / contractor number	Date		Init.	

Final Qualification

Contractor / Driver Number

Effective Date

☐ Qualified ☐ Conditionally Qualified ☐ Not Qualified

Authorized AJ XPRESS Representative

Date