

DRIVER DATA SHEET

For Casuals, New Hires & Temporary Employees

Name (Print) _____

Social Security Number _____

Motor Vehicle Operator's License Number _____

Type of License _____ Issuing State _____

Instructions: At the time of initial employment as a driver, or when being employed occasionally, the regulations of the Department of Transportation (395.8 (j) (2)) require you to furnish a statement of the amount of time worked during the last period of seven (7) consecutive days. In the spaces below, show the number of hours worked (on duty) in each of the last 7 days.

DAY	1	2	3	4	5	6	7	Total
DATE								
Hours Worked								

I hereby certify that the information given above is correct to the best of my knowledge and belief, and that I was last relieved from work at

_____ on _____
Time (Day) (Month) (Year)

Signature _____

Witness _____ Date _____