DRIVER DATA SHEET

FOR NEWLY HIRED DRIVERS OR INTERMITTENT OR MULTIPLE-EMPLOYER DRIVERS

INSTRUCTIONS: Motor Carriers using a driver for the first time or intermittently shall obtain from the driver a

signed statement giving the driver's total time on-duty during the immediately preceding 7 days and time at which such driver was last relieved from duty prior to beginning work for such carrier (see Section 395.8(j)(2) of the Federal Motor Carrier Safety Regulations). NOTE: Hours for any compensated work during the preceding 7 days, including work for a non-motor carrier entity must be recorded on this form. Check one: Newly Hired Driver ☐ Intermittent or Multiple-Employer Driver Driver's Name (print)_____ Social Security Number _____ Driver's License: State: _____ Number_____ Class_____ Endorsement(s) Restrictions Type of License _____ Issuing State _____ 7 2 3 5 DAY DATE TOTAL HOURS HOURS WORKED I hereby certify that the information given above is correct to the best of my knowledge and belief, and P.M. On ___ that I was last relieved from work at _____ Month / Day / Year ______ Date _____ Driver's Signature _____

_____ Date_____

Company Representative

Witness _____