## Prior Seven-Day HOS Record

When using a driver for the first time or intermittently, a signed statement must be obtained, giving the total time on-duty (Driving and On-Duty, Not Driving) during the immediate preceding seven days and the time at which the driver was last relieved from duty prior to beginning work.

## Driver's Name:

Day	Date	Total time on-duty					
1							
2							
3							
4							
5							
6							
7							
Today							
TOTAL:							

I hereby certify that the information contained herein is true and to the best of my knowledge and belief, and I was last released from duty at:

\_\_\_\_\_ a.m. / p.m. on \_\_\_\_\_

Today's Date: \_\_\_\_\_ Driver's Signature: \_\_\_\_\_

## DRIVER CERTIFICATION FOR OTHER COMPENSATED WORK

INSTRUCTIONS: When employed by a motor carrier, a driver must report to the carrier all on-duty time including time working for other employers. The definition of on-duty time found in Section 395.2 paragraphs (8) and (9) of the Federal Motor Carrier Safety Regulations includes time performing any other work in the capacity of, or in the employment or service of, a common, contract or private motor carrier, also performing any compensated work for any non-motor carrier entity.

Driver Status:	New Employee	Part-time	Temporary		
At this time, do you inte	this time, do you intend to work for another employer while still employed by this company?				No
Are you currently work	ing for another employer?	er?			No
				(check c	one)

I hereby certify that the information given above is true and I understand that once I become employed with this company, if I work for any additional employer(s) for compensation, I must inform this company immediately of such employment activity.

Driver's Signature		Driver's Licer	Driver's License No.		Date	
Witness: Company Represent	ative	Dat	e			