

STATE OF NEW MEXICO - Taxation and Revenue Department
MOTOR VEHICLE DIVISION



PLACEMENT INTEREST QUESTIONNAIRE

PERSONAL INFORMATION

NAME		PRIMARY PHONE NUMBER
ADDRESS		E-MAIL ADDRESS
CITY	STATE	ZIP CODE
Are you a Veteran who has been discharged, other than dishonorably, in the past 90 days or Active Duty Military/Reserve? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Have you ever been convicted of a Felony? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give full explanation and dates on Separate Attached Sheet.		

LICENSES HELD

PREVIOUSLY HELD MILITARY CDL <input type="checkbox"/>	DATE ISSUED	CLASS & ENDORSEMENTS	DRIVER LICENSE NUMBER	STATE
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MILITARY SERVICE INFORMATION

BRANCH OF SERVICE	RANK	DATES OF SERVICE
SECURITY CLEARANCE TYPE	LAST/CURRENT DUTY STATION	

EDUCATION

CHECK HIGHEST GRADE COMPLETED	7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>	10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>	GED <input type="checkbox"/>	SOME COLLEGE <input type="checkbox"/>	BACHELOR DEGREE TYPE _____	GRADUATE DEGREE TYPE _____
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WORK PREFERENCES

PREFERRED VEHICLE(S)

Class A <input type="checkbox"/> TRACTOR TRAILER <input type="checkbox"/> TRUCK-TRAILER COMBINATION <input type="checkbox"/> TANK VEHICLE	Transmission <input type="checkbox"/> MANUAL TRANSMISSION <input type="checkbox"/> AUTOMATIC TRANSMISSION	Other Preferences <input type="checkbox"/> INTERESTED IN PRIVATE SECTOR COMPANIES <input type="checkbox"/> INTERESTED IN GOVERNMENT EMPLOYMENT <input type="checkbox"/> TRUCK LOAD <input type="checkbox"/> LESS THAN TRUCK LOAD
Class B <input type="checkbox"/> CHARTER BUS <input type="checkbox"/> STRAIGHT TRUCK <input type="checkbox"/> SCHOOL BUS	Air Brakes <input type="checkbox"/> VEHICLE EQUIPPED WITH AIR BRAKES <input type="checkbox"/> VEHICLE NOT EQUIPPED WITH AIR BRAKES	

DATE AVAILABLE TO START WORK	PREFERRED SHIFTS <input type="checkbox"/> DAY <input type="checkbox"/> EVENING <input type="checkbox"/> OVERNIGHT	<input type="checkbox"/> ROTATING <input type="checkbox"/> WEEKENDS <input type="checkbox"/> WEEK DAYS ONLY	GEOGRAPHIC LOCATION
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CURRENT OR MOST RECENT WORK EXPERIENCE

EMPLOYER NAME	JOB TITLE	DATES EMPLOYED
DESCRIBE JOB DUTIES	SUPERVISOR NAME	PHONE NUMBER
	STILL EMPLOYED ? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, REASON FOR LEAVING	

This questionnaire is optional and may only be completed and submitted with form MVD11198 Application for Military Skills Test Waiver by military personnel who qualify for a military waiver of the commercial driver license (CDL) skills test. It is understood that the New Mexico Motor Vehicle Division will give this questionnaire to the New Mexico Trucking Association with the intent to initiate a contact between a commercial carrier and the military member. This questionnaire is not an application for, nor a commitment of, employment.

SIGNATURE	DATE
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