



Driver's Prior 7 Day On-Duty Record

Driver's Name (print) _____ Social Security Number _____

Driver's License Information: Issuing State _____ Number _____ Type License _____

Instructions: The Department of Transportation regulation (395.8(j)(2)) requires temporary personnel, casuals, and new hires to furnish a statement of the amount of time worked during the seven (7) consecutive days prior to employment. In the space provided below, show the number of on-duty hours worked during the last 7 days.

Day	1 (Yesterday)	2	3	4	5	6	7	
Date								
Hours worked								
							Total	_____

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

_____ : _____ am
_____ pm on _____
Day Month Year

Driver's Signature _____ Date _____

Witness _____ Date _____
Company Representative