CHARTER FILE

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| SAINT PETER, WESTONKA, PINE CITY, LESTER PRAIRIE AND CHISAGO LAKES |
|  | 01. Application for Employment |
|  | 02. Controlled Substance and Alcohol Questionnaire |
|  | 03. Request for Prior Controlled Substance and Alcohol Test Results  |
|  | 04. Copy of Annual Driving Record (MVR) – (Twice Per Year)  |
|  | 05. Annual Review of Driving Record |
|  | 06. Copy of Front and Back of Commercial Driver’s License  |
|  | 07. Notice of Moving Violation (Driver Reports to Employer) |
|  | 08. Copy of Current Medical Card |
|  | 09. Verification of Medical Examiner on National Registry of Medical Examiners (https://nationalregistry.fmcsa.dot.gov/NRPublicUI/home.seam) |