



APPLICATION FOR EMPLOYMENT

DATE: _____

PERSONAL

PHONE: _____

NAME: _____
LAST FIRST MIDDLE

PRESENT ADDRESS: _____
NO STREET APT
CITY PROVINCE POSTAL CODE

JOB(S) APPLIED FOR 1.: _____ RATE OF PAY EXPECTED: _____

JOB(S) APPLIED FOR 2.: _____ RATE OF PAY EXPECTED: _____

DO YOU WANT TO WORK: FULL TIME PART TIME

SPECIFY DAYS AND HOURS IF PART TIME: _____

HAVE YOU WORKED FOR US BEFORE? _____ IF YES, WHEN? _____

IF HIRED, ON WHAT DATE WILL YOU BE AVAILABLE TO START WORK? _____

ARE THERE ANY OTHER EXPERIENCES, SKILL OR QUALIFICATIONS WHICH YOU FEEL WOULD ESPECIALLY FIT YOU TO WORK WITH US? (IF NECESSARY ADDITIONAL SPACE IS PROVIDED TO COMPLETE THIS SECTION ON PAGE 3 UNDER PERSONAL REFERENCES.) _____

IF HIRED DO YOU HAVE RELIABLE MEANS OF TRANSPORTATION TO GET TO WORK? _____

ARE YOU BONDABLE? (ANSWER QUESTION ONLY IF YOU HAVE BEEN ADVISED THAT THIS INFORMATION IS REASONABLE AND RELEVANT TO POSITION APPLIED FOR.) YES NO

APPLICATION FOR EMPLOYMENT: DRIVER

DRIVER LICENCE NO.: _____

CLASSIFICATION: _____

CONDITIONS: _____

DUE DATE: _____ MEDICAL DUE DATE: _____

HAVE YOU SUPPLIED A DRIVERS RECORD SEARCH? YES NO

IF YES, SEARCH DATE: _____

HAVE YOU RECEIVED DANGEROUS GOODS TRAINING? YES NO

IF YES, EXPIRY DATE: _____

PLEASE (✓) ALL ACTIVITIES OF WHICH YOU HAVE EXPERIENCE:

CONTAINER WORK

FLAT BED WORK

TANKER WORK

TRAIN TRAILER WORK

"A" TRAINS "B" TRAINS

HAULING STEEL

(EXPLAIN TYPE – COIL, FLAT, BAR, ETC.) _____

ANY OTHER SPECIALIZED EQUIPMENT? (HIAB, WINCH, WRECKERS OR DUMP) _____

HAVE YOU EVER CROSSED THE AMERICAN BORDER WHILE TRANSPORTING ANY TYPE OF FREIGHT YES NO

HAVE YOU EVER BEEN REFUSED ENTRY TO THE UNITED STATES?

IF YES, EXPLAIN:

EDUCATION BACKGROUND

| | ELEMENTARY SCHOOL | | | | | HIGH SCHOOL | | | | | UNDERGRADUATE COLLEGE / UNIVERSITY | | | | GRADUATE / PROFESSIONAL | | | |
|--|-------------------|---|---|---|---|-------------|----|----|----|----|------------------------------------|---|---|---|-------------------------|---|---|---|
| SCHOOL NAME AND LOCATION | | | | | | | | | | | | | | | | | | |
| YEARS COMPLETED | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| DIPLOMA / DEGREE | | | | | | | | | | | | | | | | | | |
| DESCRIBE COURSE OF STUDY | | | | | | | | | | | | | | | | | | |
| DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIP SKILLS AND EXTRA-CURRICULAR ACTIVITIES | | | | | | | | | | | | | | | | | | |
| DESCRIBE ANY HONOURS YOU HAVE RECEIVED | | | | | | | | | | | | | | | | | | |

PRIOR WORK HISTORY (LIST IN ORDER, LAST OR PRESENT EMPLOYER FIRST)

| DATES | | NAME AND ADDRESS OF EMPLOYER | RATE OF PAY | | SUPERVISOR'S NAME AND TITLE | REASON FOR LEAVING |
|-------------------------------------|----|------------------------------|-------------|--------|-----------------------------|--------------------|
| FROM | TO | | START | FINISH | | |
| | | | | | | |
| DESCRIBE IN DETAIL THE WORK YOU DID | | | | | | |
| PHONE NO. | | | | | | |
| DATES | | NAME AND ADDRESS OF EMPLOYER | RATE OF PAY | | SUPERVISOR'S NAME AND TITLE | REASON FOR LEAVING |
| FROM | TO | | START | FINISH | | |
| | | | | | | |
| DESCRIBE IN DETAIL THE WORK YOU DID | | | | | | |
| PHONE NO. | | | | | | |
| DATES | | NAME AND ADDRESS OF EMPLOYER | RATE OF PAY | | SUPERVISOR'S NAME AND TITLE | REASON FOR LEAVING |
| FROM | TO | | START | FINISH | | |
| | | | | | | |
| DESCRIBE IN DETAIL THE WORK YOU DID | | | | | | |
| PHONE NO. | | | | | | |
| DATES | | NAME AND ADDRESS OF EMPLOYER | RATE OF PAY | | SUPERVISOR'S NAME AND TITLE | REASON FOR LEAVING |
| FROM | TO | | START | FINISH | | |
| | | | | | | |
| DESCRIBE IN DETAIL THE WORK YOU DID | | | | | | |
| PHONE NO. | | | | | | |

MAY WE CONTACT THE EMPLOYERS LISTED ABOVE? _____ IF NOT, INDICATE BELOW WHICH ONE(S) YOU DON NOT WISH US TO CONTACT

PERSONAL REFERENCES

GIVE THE NAMES OF AT LEAST 3 PERSONS WHO CAN SUPPLY INFORMATION PERTINENT TO YOUR JOB PERFORMANCE (EXCLUDING FORMER EMPLOYERS OR RELETIVES.)

| NAME AND OCCUPATION | ADDRESSES | PHONE NUMBER |
|---------------------|-----------|--------------|
| 1 _____ | _____ | |
| 2 _____ | _____ | |
| 3 _____ | _____ | |
| 4 _____ | _____ | |
| 5 _____ | _____ | |

OCCASIONALLY THE FORM OF AN APPLICATION BLANK MAKES IT DIFFICULT FOR AN INDIVIDUAL TO ADEQUATELY SUMMARIZE THEIR COMPLETE BACKGROUND. TO ASSIST US IN FINDING THE PROPER POSITION FOR YOU IN OUR COMPANY, USE THE SPACE BELOW TO SUMMARIZE ANY ADDITIONAL INFORMATION NECESSARY TO DESCRIBE YOUR FULL QUALIFICATIONS.

THANK YOU FOR COMPLETING THIS APPLICATION FORM AND FOR YOUR INTEREST IN EMPLOYMENT WITH US. WE WOULD LIKE TO ASSURE YOU THAT YOUR OPPORTUNITY FOR EMPLOYMENT WITH THIS COMPANY WILL BE BASED ONLY ON YOUR MERIT AND ON NO OTHER CONSIDERATION.

PLEASE READ CAREFULLY APPLICANT'S CERTIFICATION AND AGREEMENT

I HEREBY CERTIFY THAT THE FACTS SET FORTH IN THE ABOVE EMPLOYMENT APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE CONSIDERED SUFFICIENT CAUSE FOR DISMISSAL.

SIGNATURE OF APPLICANT: _____

QUESTIONNAIRE

GIVE THE SHORTEST ROUTES:

1) FROM HWY. 401 AND DIXIE RD. – TO COMMISSIONER ST.

2) FROM HWY. 401 AND MARKHAM RD. – TO CHERRY ST.

3) FROM LANGSTAFF AND KEELE ST. – TO D.V.P. AND LAKESHORE BLVD.

NAME (5) ITEMS YOU WOULD LOOK FOR ON A BILL OF LADING?

WHEN WOULD YOU SIGN A BILL OF LADING S.L.C.?

GIVE THE PROCEDURE FOR PICKING UP A TRAILER (HOOK UP)

IN THE EVENT OF AN ACCIDENT, OF WHICH YOU ARE INVOLVED (NO PERSONAL INJURIES TO EITHER PARTY!) WHAT PROCEDURES WOULD YOU TAKE? _____

NAME (5) PIECES OF DOCUMENTATION THAT YOU MUST PRODUCE WHILE OPERATING A COMMERCIAL VEHICLE?
