

## Owner/Operator Application

Qualified applicants are considered for all positions without regard to race, colour, religion, sex, national origin, age, marital status, or the presence of a non-job related medical condition or handicap.

Date of application \_\_\_\_\_

Position(s) applied for \_\_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
Last First Initial

Address \_\_\_\_\_  
Street City

Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_

How long at this address? \_\_\_\_\_

Previous address \_\_\_\_\_  
Street City Province & Postal Code

Are you a Canadian citizen? \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Can you provide proof of age? \_\_\_\_\_  
(Required for Truck Drivers)

In case of emergency, notify \_\_\_\_\_  
Name City Telephone

Have you worked for this company before? \_\_\_\_\_ When? \_\_\_\_\_

What was the rate of pay? \_\_\_\_\_ What was the position? \_\_\_\_\_

What was the reason for leaving? \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If not, how long since last employment? \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

Would you be willing to take a physical examination or drug test by a qualified physician? \_\_\_\_\_

All driver applications must include:

- 1)  A current driver abstract.
- 2)  A current police search.
- 3)  A photocopy of driver's license with picture.
- 4)  Proof of Out-of-Province Insurance.