

**DRIVER'S  
APPLICATION FOR EMPLOYMENT**

***Q-Line Trucking***

PO Box 110B, RR#4, Corman Industrial Park  
Saskatoon, SK S7K 4J7  
Ph: (306) 651-3540 Fx: (306) 651-3541

Name: \_\_\_\_\_ Social Insurance #: \_\_\_\_\_

Driver's License: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone #: \_\_\_\_\_

Cellular #: \_\_\_\_\_

Addresses of residency for the past 3 years:

_____	_____	_____	How long? _____
Street or Box#	City/Town	Province	
_____	_____	_____	How long? _____
Street or Box#	City/Town	Province	
_____	_____	_____	How long? _____
Street or Box#	City/Town	Province	

Are you legally able to drive commercially in the United States? \_\_\_\_\_

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

Reason for leaving? \_\_\_\_\_

Who referred you to our company? \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_ If yes, please explain on a separate sheet of paper. Conviction of a crime is not an automatic bar to employment - all circumstances will be considered

Is there any reason you might be unable to perform the functions of the job for which you have applied? \_\_\_\_\_ If yes, explain if you wish: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT HISTORY**

All commercial driver applicants must provide the following information on all employers during the preceding 7 years. Please list complete addresses and telephone numbers.

LAST EMPLOYER

Name \_\_\_\_\_

Address: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Street or Box# mm/dd/yyyy mm/dd/yyyy

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Position Held \_\_\_\_\_

Contact person: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ Wage: \_\_\_\_\_

LAST EMPLOYER

Name \_\_\_\_\_

Address: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Street or Box# mm/dd/yyyy mm/dd/yyyy

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Position Held \_\_\_\_\_

Contact person: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ Wage: \_\_\_\_\_

LAST EMPLOYER

Name \_\_\_\_\_

Address: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Street or Box# mm/dd/yyyy mm/dd/yyyy

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Position Held \_\_\_\_\_

Contact person: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ Wage: \_\_\_\_\_

LAST EMPLOYER

Name \_\_\_\_\_

Address: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Street or Box# mm/dd/yyyy mm/dd/yyyy

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Position Held \_\_\_\_\_

Contact person: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ Wage: \_\_\_\_\_

\*Please list employers on another sheet, if required.

**ACCIDENT RECORD**

Please list all accidents in which you were involved as a driver during the past 5 years. If none, write "none".

<u>Date</u>	<u>Description of Accident</u>	<u>Fatalities/Injuries</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**TRAFFIC CONVICTIONS**

Please list all traffic convictions and license suspensions for the past 5 years. If none, write "none".

<u>Date</u>	<u>Location</u>	<u>Charge</u>	<u>Penalty</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**EDUCATION**

Circle highest grade completed:    1 2 3 4 5 6 7 8    Highschool: 9 10 11 12    College:    1 2 3 4

Last school attended: \_\_\_\_\_  
Name City

**DRIVING EXPERIENCE AND QUALIFICATIONS**

Please list all driver's licenses you have held in the past 5 years:

<u>License #</u>	<u>Province</u>	<u>Type</u>	<u>Expiry Date</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle:    YES    NO

B. Has any license, permit, or privilege ever been suspended or revoked?    YES    NO

If the answer to either A or B is yes, please give details, (use an attached sheet if required)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list all equipment in the following classes that you have experience operating:

<u>Class of Equipment</u>	<u>Type (Flat, Van, etc.)</u>	<u>Dates</u>		<u># of Miles</u>
Straight Truck	_____	From _____	To _____	_____
Tractor & Semi-Trailer	_____	From _____	To _____	_____
Tractor & Two Trailers	_____	From _____	To _____	_____
Motorcoach/Schoolbus	_____	From _____	To _____	_____
Other _____	_____	From _____	To _____	_____

List all provinces and states that you have operated in for the last 5 years:

List all special course or training that help you as a driver:

Which safe driving awards do you hold, and from whom?

Have you ever owned your own truck and/or trailer? When, for how long, and what type?

What other trucking, transportation, or other experience do you have that may help you in your work for this company?

### **TO BE READ AND SIGNED BY APPLICANT**

This certifies that this application was completed by me, and that all entries and information on it are true and complete to the best of my knowledge.

I authorize you, the prospective employer, to make such investigations and inquiry of my personal, employment, or medical history and other matters as may be necessary in arriving at an employment decision.

I hereby release employers, school, health care providers, and other persons from all liability in responding to inquiries and releasing information in connection with my application.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the company.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date