SUBMIT PRINT

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DRIVERS APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Name:	
Address:	
City:	
Province:	
Postal Code:	
Social Insurance No:	
Date of Birth:	
License No:	
Home Phone:	
Cell Phone:	
Alternate Phone:	
Email:	

EMERGENCY CONTACT

Emergency Contact:	
Relationship:	
Phone:	

EDUCATION

Last School Attended:	
Highest Grade/ Level Completed:	
Class One Driver's License (Location/Date):	

Has your license ever been suspended? No ◯ Yes ◯

List any other courses or experience that may apply to this job:

EMPLOYMENT HISTORY

1. Company Name & Address:
   Position:
   Contact Person:
   Phone No:
   Dates of Employment From: To:
   Reason for Leaving:

2. Company Name & Address:
   Position:
   Contact Person:
   Phone No:
   Dates of Employment From: To:
   Reason for Leaving:

3. Company Name & Address:
   Position:
   Contact Person:
   Phone No:
   Dates of Employment From: To:
   Reason for Leaving:

4. Company Name & Address:
   Position:
   Contact Person:
   Phone No:
   Dates of Employment From: To:
   Reason for Leaving:

By signing (or typing my name in the signature box) this document, I hereby certify that the above information is answered correctly and completely to the best of my knowledge. I consent to Prince Freight Lines making any and all investigations as may be deemed necessary while determining my suitability for this position. Making false or misleading statements now, or during the interview, may result in my discharge. I acknowledge that I am required to follow all rules and regulations of the company.

Signature:
Print Name:
Date: