DRIVER EMPLOYMENT APPLICATION

NEIGHBOURHOOD COURIER INC.
"We Deliver on Time Every Time"
Telephone: 905.459.6789 | 905.459-6799
www.neighbourhoodcourier.com

APPLICANT INFORMATION

Company Name	Date of Application	
First Name	Last Name	
Phone	Date of Birth	SIN #
Position Applied For ☐ Van ☐ Straight Truck ☐ Truck Tractor & Semi-Trailer	Date Available for Work	

CURRENT STREET ADDRESS

Street Address	Apt. #	City
Province	Postal Code	

LICENCE INFORMATION

Province	Licence #	Expiration Date
Type / Class	Endorsements	

PREVIOUS HELD LICENCE

Province	Licence #	Expiration Date
Type / Class	Endorsements	

Questionaire

1.) Are you currently employed? ☐ YES ☐ NO ***If yes, explain reason for leaving*** _____
2.) Driving position applying for: ☐ PART-TIME ☐ FULL-TIME
3.) Educational Background: ☐ High School ☐ College / Trade School
4.) Have you ever been convicted of or have a pending ☐ Felony ☐ DWI ☐ DUI?
If yes, explain on a separate sheet of paper
5.) Are you authorized to work in Canada? ☐ YES ☐ NO ☐ PR or ☐ Work Permit
6.) How many years of commercial driving experience you have? _____
7.) Rate of pay expected? _____
8.) Any reason you might be unable to perform the functions of the job which you have applied for such as lifting up to 70lbs or moving pallets around? _____

PREVIOUS EMPLOYERS

Company Name		Phone Number
Address		
Position Held	Start Date	End Date
Reason For Leaving		

Company Name		Phone Number
Address		
Position Held	Start Date	End Date
Reason For Leaving		

Company Name		Phone Number
Address		
Position Held	Start Date	End Date
Reason For Leaving		

TO BE READ AND SIGNED BY APPLICANT

I, hereby authorize Neighbourhood Courier, Inc. to make investigations including contacting current and prior employer(s) into my personal, employment and other related matters as may be necessary in arriving at an employment decision. I hereby release employers 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 also understand that I am required to abide by all rules and regulations of the company.

This certifies that I completed this application,, and that all entries on it and information in it are true and completed to the best of my knowledge.

Applicant Signature	Date
Applicant Name (Printed)	

INTERNAL USE ONLY

Approved	Declined