



380 Bradwick Dr. Concord,

ON L4K 2W4

416-880-5194

service@capitalexpresstransport.com

DRIVER'S APPLICATION FOR EMPLOYMENT

Please fill in all the following sections in print.

In compliance with federal and provincial equal employment opportunity laws, qualified applicants are considered for all positions without regard to ethnicity, religion, sexual orientation or identification, national origin, age, marital status, and or non-job related disability.

Date of application _____/_____/_____

Position(s) Applied for _____

Full Legal Name _____

List your addresses of residency for the past 3 years:

Street	City	Province	Postal Code	From (Date)	To (Date)

Do you have the legal right to work in Canada? Yes / No

Do you require a visa to legally work in Canada? Yes / No

Are you a current or past employee of Capital Express Line? Yes / No

Dates: From _____ to _____ Pay Rate _____

Position _____

Reason for leaving (if applicable) _____



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Are you now employed? _____
If not, how long since leaving last employment? _____

Where you referred? Yes / No
If so, who referred you? _____

Expected pay rate _____

Required by Truck Drivers

Date of Birth _____/_____/_____

Can you provide proof of age with legal documentation or government ID? Yes / No

Please attach the following files with your application (all files must reflect the given information within this application):

- Police Check Report (no more than 30 days old)
- Drivers Abstract (no more than 30 days old)
- Drivers CVOR

Driver Licence

List each licence held in the past 3 years

Licence Type	Province Issued	Licence Number	Expiry Date

Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes / No
IF YES, Attach statement giving details.

Has any license, permit or privilege ever been suspended or revoked? Yes / No
IF YES, Attach statement giving details.



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Driving Experience

Class Equipment	Type of Equipment (Van, Tank, Flat)	Date From	Date To	Approx. No. of Miles (Total)
Straight Truck				
Tractor and Semi-Trailer				
Tractor Two Trailers				
LCV				
Other:				
Other:				

List all the provinces you have worked in over the last five years.

List any special courses or training you have received as a driver.

Required by All Applicants

Employment

Please provide all information of employment for the past 3 years, listing employers in reverse order starting with the most recent. If you are applying for a drivers position please provide 10 years of relevant history as applicable (attached a second sheet if needed).

Employer				Date	
Name				From	
Address		City		To	
Province		Postal Code		Position Held	
Contact Person		Phone Number			
Where you subject to Motor Carrier Safety regulation while employed? Yes / No				Reason for leaving	
Was you job designated as a safely sensitive function where you were subject to drug and alcohol testing regularly? Yes / No					



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Employer				Date	
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Address		City		To	
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Employer				Date	
Name				From	
Address		City		To	
Province		Postal Code		Position Held	
Contact Person		Phone Number			
Where you subject to Motor Carrier Safety regulation while employed? Yes / No				Reason for leaving	
Was you job designated as a safely sensitive function where you were subject to drug and alcohol testing regularly? Yes / No					

Education

Circle Highest Grade Completed

1 2 3 4 5 6 7 8

HIGHSCHOOL: 1 2 3 4

COLLEGE: 1 2 3 4

Last School Attended _____

Show any trucking, transportation or other experience that may help in your work.



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List courses and training other than shown elsewhere in this application.

General

List special equipment or technical materials you can work with (other than those already showing).

Is there any reason you might be unable to perform the functions of the job for which you have applied (as directed in the attached job description)? Yes / No

If yes, explain if you wish:

To Be Read and Signed by Applicant

This certifies that this application was completed by the named applicant above, and that all entries on it and information in it are true and complete to the best of their knowledge.

I, _____, hereby authorize Capital Express Lines to make such investigations and inquiries of my personal, employment, criminal and drivers history and other related matters as may be necessary in arriving at an employment decision. I hereby release employer, schools, 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.

Name

Signature

Date



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Process Record (For Office Use Only)

APPLICANT HIRED _____ REJECTED _____

DATE EMPLOYED _____ POINT EMPLOYED _____

DEPARTMENT _____ CLASSIFICATION _____
(IF rejected, summary report of reasons should be placed in file)

THIS SECTION TO BE FILLED IN BY RESPONSIBLE OFFICER OR COMPANY REPRESENTATIVE

	Superior	Good	Fair	Below Average	Poor	Written Record on File
Applications						
Interview						
Past Employment						
Written Exam						
Road Test						
Criminal and Traffic Convictions						

SIGNATURE OF INTERVIEWING OFFICER _____

TERMINATION OF EMPLOYMENT

DATE TERMINATED _____

DEPARTMENT RELEASED FROM _____

DISMISSED / VOLUNTARILY QUIT / OTHER _____

TERMINATION REPORT PLACED IN FILE _____

SUPERVISOR _____