



FILL OUT ALL SIX PAGES OF THIS APPLICATION PACKAGE AND FAX BACK TO RECRUITING AT 1-888-277-0524 OR CALL 1-855-277-4473

DOCUMENTS THAT MUST BE SENT WITH APPLICATION!!!!!!!!!!

- Driver Abstract (dated within the last 30 days)
- CVOR Abstract (dated within the last 30 days)
- Fast Card (Copy of Front and Back) - **if you have one**
- Criminal Search (dated within the last 6 months)
- Driver's License (Copy of Front and Back)
- US Documents (if required) **(Fast Card, Passport or Enhanced Driver's license)**
- Valid TDG Card (if you have one)
- Work Permit (if applicable) with proper accompanying documentation
- Social Insurance Card

Owner Operators must also include

- Scale Ticket (with truck full of fuel)
- Speed Limiter Slip (must be able to prove you meet the requirements of ONT and PQ Laws)
- We also need the following for licensing: Bill of sale/lease agreement, Current emission test, Incorporation or Business papers, Copy of Annual Inspection, WSIB if hiring Drivers, and Copy of Ownership (will need original to pick up plates).

OWNER OPERATOR TRUCK INFORMATION

APPLICANT NAME: _____

MAKE: _____

MODEL: _____

YEAR: _____

COLOUR: _____

VIN # _____

DO YOU OWN or LEASE THE TRUCK? _____

WHOSE NAME IS THE OWNERSHIP IN? _____

COMPANY DRIVERS

- Once approved you will be scheduled for a road test and orientation.

OWNER OPERATORS

- Once application has been approved, a truck inspection will follow.
- If the truck passes inspection, a road test will follow using your own (or a company) truck
- Upon passing the road test you will be scheduled for in-class orientation.
- YOU MUST PROVIDE ALL DOCUMENTS FOR LICENSING PRIOR TO ORIENTATION
- Once Plates have been ordered, arrangements will be made to equip your truck with a satellite and decals.



Montreal * Woodbridge * Fort Erie * Simcoe * London
Recruiting: 905-893-5090 ext. 152 • Fax: 905-893-5119

What AZ Position are you applying for? O/O USA [] Canada [] Company USA [] Ontario [] Canada []

Date of Application: _____ How did you hear about us? _____

Last Name _____ First _____ Middle _____

Address _____ # Street _____ City _____ HM Phone _____

Province _____ Postal Code _____ Cell Phone _____

How long have you lived at above address? _____ Email Address _____

Social Insurance # _____ When are you available to start? _____

Legally Eligible to work in Canada Yes [] No [] Criminal Record? Yes [] No []

How many years experience driving Tractor Trailer? _____ Birth Date _____ / _____ / _____
M D Y

Drivers License # _____ Class _____ Expiry _____

Has your license ever been suspended/revoked/denied? Yes [] No [] Reason: _____

Can you cross the US Border? Yes [] No [] Fast Card? Yes [] No [] Passport? Yes [] No []

Fast/Passport Expiry Date: _____ / _____ / _____ FastCard/Passport# _____
M D Y

Have you worked for us before? Yes [] No [] Reason for leaving? _____

Can you drive a standard? Yes [] No [] Can you work 14 hrs? Yes [] No [] Are you bondable? Yes [] No []

Are you Diabetic? Y [] N [] Are you on any Medications? Y [] N [] What Meds? _____

Can you transport cigarettes, alcohol or meat? Y [] N [] Do you have any Cardio Issues? Y [] N []

Are you willing to travel the Eastern Seaboard & New York City? Y [] N [] Can you lift 23kg? Y [] N []

Have you been injured on the job? Yes [] No [] Any lost time for illness? Yes [] No []

List injury/illness: _____ How long were you off work? _____

Driver Signature _____ Date _____

Please list your **last 5 years** of employment (**CURRENT JOB FIRST !!!!!**) **MUST PROVIDE CONTACT INFO**

Company _____ Address _____

Dates of Employment Start _____ Finish _____ Street _____ Position _____ City _____

Type of Truck Operated Straight Truck Tractor Trailer Standard Transmission Bunk Truck Day Cab

Type of Trailer Hauled 48/53 ft Van Reefer Flatbed Trains Multi Axle Lift Axle Steer Axle

Where did you run? Local Only Quebec Western Canada Eastern USA Mid West USA Western USA Mountains

Contact Person: _____ Phone # _____ Fax # _____

WHY DID YOU LEAVE THIS POSITION? _____

2nd Last Job

Company _____ Address _____

Dates of Employment Start _____ Finish _____ Street _____ Position _____ City _____

Type of Truck Operated Straight Truck Tractor Trailer Standard Transmission Bunk Truck Day Cab

Type of Trailer Hauled 48/53 ft Van Reefer Flatbed Trains Multi Axle Lift Axle Steer Axle

Where did you run? Local Only Quebec Western Canada Eastern USA Mid West USA Western USA Mountains

Contact Person: _____ Phone # _____ Fax # _____

WHY DID YOU LEAVE THIS POSITION? _____

3rd Last Job

Company _____ Address _____

Dates of Employment Start _____ Finish _____ Street _____ Position _____ City _____

Type of Truck Operated Straight Truck Tractor Trailer Standard Transmission Bunk Truck Day Cab

Type of Trailer Hauled 48/53 ft Van Reefer Flatbed Trains Multi Axle Lift Axle Steer Axle

Where did you run? Local Only Quebec Western Canada Eastern USA Mid West USA Western USA Mountains

Contact Person: _____ Phone # _____ Fax # _____

WHY DID YOU LEAVE THIS POSITION? _____

4th Last Job

Company _____ Address _____

Dates of Employment Start _____ Finish _____ Street _____ Position _____ City _____

Type of Truck Operated Straight Truck Tractor Trailer Standard Transmission Bunk Truck Day Cab

Type of Trailer Hauled 48/53 ft Van Reefer Flatbed Trains Multi Axle Lift Axle Steer Axle

Where did you run? Local Only Quebec Western Canada Eastern USA Mid West USA Western USA Mountains

Contact Person: _____ Phone # _____ Fax # _____

WHY DID YOU LEAVE THIS POSITION? _____

5th Last Job

Company _____ Address _____

Street _____ City _____

Dates of Employment Start _____ Finish _____ Position _____

Type of Truck Operated Straight Truck Tractor Trailer Standard Transmission Bunk Truck Day Cab

Type of Trailer Hauled 48/53 ft Van Reefer Flatbed Trains Multi Axle Lift Axle Steer Axle

Where did you run? Local Only Quebec Western Canada Eastern USA Mid West USA Western USA Mountains

Contact Person: _____ Phone # _____ Fax # _____

WHY DID YOU LEAVE THIS POSITION? _____

6th Last Job

Company _____ Address _____

Street _____ City _____

Dates of Employment Start _____ Finish _____ Position _____

Type of Truck Operated Straight Truck Tractor Trailer Standard Transmission Bunk Truck Day Cab

Type of Trailer Hauled 48/53 ft Van Reefer Flatbed Trains Multi Axle Lift Axle Steer Axle

Where did you run? Local Only Quebec Western Canada Eastern USA Mid West USA Western USA Mountains

Contact Person: _____ Phone # _____ Fax # _____

WHY DID YOU LEAVE THIS POSITION? _____

IF YOU HAVE GAPS IN YOUR EMPLOYMENT HISTORY – List them below !!

Unemployment Gap: Start Date _____ End Date _____ Reason _____

Unemployment Gap: Start Date _____ End Date _____ Reason _____

Unemployment Gap: Start Date _____ End Date _____ Reason _____

Have you had Dangerous Goods Training in the last 3 years? Y N Expiry Date: _____

Education: Highest Grade Completed 8 9 10 11 12 College Name _____ University Name _____

Driver Training: Name of School _____ Course _____ Location _____

List any Accidents you have had in the last 3 years

Date	Description	Fines / Charges ?	Amount	CVOR Affected

Tickets within the Last 3 Years (Car or Truck)

Date	Description	Fines / Charges ?	Amount	CVOR Affected



Montreal * Mississauga * Fort Erie * Brantford * Simcoe * London * Chatham

Driver Please Sign and Date in the Box and at Bottom of Page !

REQUEST FOR INFORMATION FROM PREVIOUS EMPLOYER

Please Return Reference via FAX to 905-565-9116 Attention Recruiting

TO BE READ AND SIGNED BY THE APPLICANT

My signature below certifies this 5 Page application was completed by me, and that all information within it is true and complete to the best of my knowledge. FMSCR 391.21 (12)

I authorize you to make such investigations and inquiries of my personal, employment, financial and/or medical history and other related matters as may be necessary in arriving at an employment/contract of service decision. (generally, inquiries regarding medical history will be made only if and after a condition offer of employment/contract of service has been extended.) I hereby release employers, schools, health care providers and other persons from all liability in responding to inquiries and releasing information in connection with my application. FMSCR 391.23
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 Bruce R. Smith Limited. I understand that information I provide regarding current and/or previous employers may be used, and those employer(s) will be contacted, for the purpose of investigating my safety performance history as required by 49CFR 391.23 (d) and (e).

I understand that I have the right to:

- Review information provided by previous employers;
- Have errors in the information corrected by previous employers and for those previous employers to resend the corrected information to the prospective employer; and
- Have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information.

Consent for information from Previous Employer:

I, hereby authorize you to release personal, employment, financial and/or medical information to BRUCE R SMITH LIMITED for purposes of investigation as required by Section 391.23 of the Federal Motor Carrier Safety Regulations. You are released from any and all liability that may result from furnishing such information.

Applicant's Name: _____

SIN# _____

Applicant's Signature _____

Date _____



New Employee's Drug and Alcohol Statement

In accordance with 49 CFR 40.25(j), as the employer, you must ask any prospective employee, whether he or she has tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which the employee applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past three years.

Company Name: BRUCE R SMITH LIMITED

Address: RR # 2 SIMCOE, ONTARIO N3Y 4K1

Prospective Employee Name: _____

Prospective Employee's SIN/ID number: _____

To be answered by the employee:

Have you tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past three years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

If the employee admits that he or she had a positive test or refusal to test, you must not use the employee to perform safety-sensitive functions for you, until and unless the employee documents successful completion of the return-to-duty process (see 40.25(b)(5) and 40.25(e)). [The return-to-duty process is outlined in Subpart O of Part 40.]

Prospective Employee Signature

Date

Witnessed By (Printed Name)

Date

Witnessed By (Signature)

Title

BRUCE R. SMITH NEW DRIVER INFORMATION SHEET

NAME: _____

When was last time you drove AZ tractor trailer?	_____		
Can you drive a standard transmission	YES	NO	
What speeds are you familiar with...	10	13	15 18
When was the last time you drove standard transmission?	_____		
Are you comfortable with heavy loads? (up to 80000lbs)	YES	NO	
When was the last time you used a tandem trailer?	_____		
When was the last time you used a 3 axle trailer?	_____		
When was the last time you used a lift axle trailer?	_____		
When was the last time you used a 4 axle trailer?	_____		
When was the last time you used a reefer trailer?	_____		
If no multi axle experience are you willing to train?	YES	NO	
Have you used a trailer with a steerable axle?	YES	NO	
Are you ok with working 10-14 hours shifts?	YES	NO	
Are you ok with varying start times?	YES	NO	
Are you capable of hand-bombing 50lbs	YES	NO	
Do you know what a schedule 1 is?	YES	NO	
Do you use a schedule 1 when doing a pre-trip?	YES	NO	
Is there anything that would prevent you from accepting the following:			
Loads containing meat (including pork) products?	YES	NO	
Loads containing alcohol products?	YES	NO	
Do you have any outstanding tickets/fines, tickets/fines before courts or license suspensions that would prevent you from enter a state/province?	YES	NO	
Have you ever been restricted from entering any customer facilities?	YES	NO	
If Yes what customers: _____			

FOR BUNK Drivers

When was the last time you drove a bunk truck?	_____		
Do you have satellite experience?	YES	NO	
If yes what system _____			

FOR USA Drivers:

Last time you the crossed USA Border	_____		
What Provinces or States have you travelled to?	_____		

What border clearances are you familiar with?	_____		

Have you done meat inspections before?	YES	NO	
Are you willing to travel to New York and New Jersey?	YES	NO	