

Contractor Application

Please provide the following with your application: Copy of Vehicle Registration License Request HST Copy of Company and Driver CVOR Abstract PMCVI / E-test Last Name: _____ First Name: _____ Name of Corporation: Address: Date of Birth: _____ mm/dd/yyyy Can you drive: Automatic Standard How many years of truck driving experience have you had? _____ Truck Make/Model: _____ Year: ____ Straight Truck? Tractor Daycab? Bunk? Expected Pay Rate: _____ Available Start Date: _____ **Education** - Please check what schooling you have completed: High School Diploma College Degree **University Degree** List any specialized training or apprenticeship skills:

Previous Employment

Start Date:	End Date:
Company Name:	
Supervisor's Name:	
Reason for Leaving:	
Job Description:	
Start Date:	End Date:
Company Name:	
Supervisor's Name:	
Reason for Leaving:	
Job Description:	
Personal References – Please provide three.	
Name:	Phone Number:
Name:	Phone Number:
Name:	Phone Number:
I hereby certify that the facts set forth in this application are true and complete to the best of my knowledge. I understand that if there are falsified statements, it shall be considered sufficient cause for dismissal.	
Signature of Applicant	Date

Please send the completed application to ${\color{red} {\bf SCM@pinnacletransport.ca}}.$