CANEDA TRANSPORT DRIVER APPLICATION

Thank you for your interest in Caneda! We always look forward to applications from great people who would like to join our team! Send your completed application form to hr@caneda.com.

Date of Application	on:					
Position Applied F	For: 🗆 Company Driver	🗆 Owner Opera	tor			
Please select you	r preferred region of operat	ion: 🗆 Canada	Cross Border	□ Local/Regio	onal	
How did you hear	r about Caneda Transport?					
PERSONAL/COM	NTACT INFORMATION					
Full Name (Please e	nter name as shown on your driver	's license)		Date of Birth:		
Last Name	First Name		Middle Initial	Month	Day	Year
Email Address:	Phone Number:					-
Current Address:						_
	Street Address					
	City	Provin	ce/State Postal	l/Zip Code		
	How long have you lived	here?				

QUALIFICATIONS

Driver applicants must meet all hiring qualifications to be considered for hire where applicable based on the position that the applicant is applying for. Applicants that do not meet all the qualifications may not be considered. Please fill out the below based on the position you are applying for.

Cross Border:	OR	Canada / Local / Regional:
Must be at least 25 years old, with 5 years of related LTL and Cross Border Class 1 experience.	· –	Must be at least 25 years old, with 5 years of related LTL Class 1 experience.
\Box Must be legally entitled to work in Canada and		Must be legally entitled to work in Canada.
cross international borders. (where required)		Hold a valid Class 1 license.
Hold a valid Class 1 license.		Meets all Transport Canada requirements.
Hold a valid Passport and FAST card.		(where applicable)
Meets all Transport Canada and US DOT requirements (where applicable)		Maximum 4 demerits and 2 moving violations on abstract, provided within 30 days of hire.
Maximum 4 demerits and 2 moving violations on		No preventable accidents or DUI charges in the
abstract, provided within 30 days of hire.		last 5 years.
\Box No preventable accidents or DUI charges in the		
last 5 years.		

The following must be complete prior to offer of contract and orientation:

- □ Applicant must agree to pre-employment Alcohol and Drug test (negative result) and background check (with at least 3 references.
- □ Applicant must successfully complete a third-party evaluation/road test.
- □ Applicant must successfully complete full orientation and acknowledge and sign all relevant documentation.

LICENSE/EXPERIENCE INFORMATION

				CANEDA
LICENSE/EXPERIENCE INFORMATION				
Driver License:				
Number	Class		Province/State	Expiry Date (mm/dd/yyyy)
Driving Experience: (Total years)				
Experience In: LTL Flat Deck (Check all that apply)	🗆 Step 🛛	Deck	🗆 Van 🛛	Mountain Driving
Provinces Driven In:			States Driven In:	
Do you have a Free and Secure Trade (FAST) card?	□ Yes	🗆 No	□ N/A (Local /F	Regional or Canada Only)
Do you have electronic ELD Experience?	□ Yes	□ No	,	
Are you legally entitled to work in Canada?	□ Yes	🗆 No		
Have you set up a Clearinghouse account?	□ Yes	🗆 No	I	
Has your license ever been denied or suspended? If yes, please provide an explanation:	□ Yes	□ No		

EQUIPMENT INFORMATION (Owner Operators Only)

What year is your tractor?	
What is the make of your tractor?	
What is the model of your tractor?	
Is your tractor a lease or do you own?	□ Leased □ Owned
Do you have a Dash Cam installed?	🗆 Yes 🛛 No

ACCIDENTS/VIOLATIONS

Accident Record/Violations for the past 3 years.

Date	Nature of Violation	
_		
Date	Nature of Accident	Injury or Fatality?
		🗆 Yes 🛛 No
		🗆 Yes 🛛 No
		🗆 Yes 🗆 No

EMPLOYMENT RECORD

Note: DOT requires that employment for at least three years and/or Commercial Driving Experience for the past ten years be shown.

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Have you been previo	usly employed with Caneda Transport? 🛛 Yes	i 🗆 No	Date Range		_		
Company Name		May we co	ontact this employer?	□ Yes □	No		
Position	Start Date		End Date				
Address							
Contact	Street	^{City} Phone		Province/State	5		
Reason for Leaving							
Was this position subj	ect to FMCSA regulations (US)?		□ Yes	□ No			
Company Name		May we co	ontact this employer?	□ Yes □	No		
Position	Start Date		End Date	<u> </u>			
Address	Stat Date						
Address	Street	City		Province/State	5		
Contact		Phone					
Reason for Leaving							
	ect to a DOT regulated alcohol and controlled s	ubstance test	ing program? 🛛 Yes	□ No			
Was this position subj	ect to FMCSA regulations (US)?		□ Yes	□ No			
Company Name		May we co	ontact this employer?	□ Yes □	No		
Position	Start Date		End Date				
Address							
.	Street	City		Province/State	2		
Contact		Phone					
Reason for Leaving	ect to a DOT regulated alcohol and controlled s	ubstance test	ing program? 🛛 Yes	□ No			
	ect to FMCSA regulations (US)?						
Company Name		May we co	ontact this employer?	□ Yes □	No		
Position	Start Date		End Date				
Address		<u> </u>					
Contact	Street	^{City} Phone		Province/State	2		
Reason for Leaving Was this position subj	ect to a DOT regulated alcohol and controlled s	ubstance test	ing program? □ Yes	□ No			
	ect to FMCSA regulations (US)?		□ Yes	□ No			

TO BE READ & SIGNED BY THE APPLICANT

I UNDERSTAND THAT THE INFORMATION ON THIS APPLICATION WILL BE USED TO ASSESS APPLICANT SUITABILITY AND THAT PRIOR EMPLOYERS WILL BE CONTACTED FOR THE PURPOSES OF EMPLOYMENT INVESTIGATION.

I certify that this application was completed by me the applicant, and that all entries on it and information in it are true and completed to the best of my knowledge.

I authorize Caneda Transport Ltd. and their assigned agents, to make such investigations and inquiries of my personal, employment, criminal search; driving abstracts; drug results from previous employers or their consortium or their insurance carrier or agent for my driving record; and other related matters as may be necessary in arriving at an employment decision.

If hired or contracted, this authorization shall remain on file and shall service as ongoing authorization to recheck or report as deemed necessary at any time throughout my employment or contract period or after such period.

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 or contract, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Furthermore, I understand that Caneda Transport Ltd. and/or their Agents may keep any information on file including work performance as related to my employment period and make it available to any second party only with my verbal or written consent. I understand, also, that I am required to abide by all rules and regulations of Caneda Transport Ltd.

For purposes of gathering this information, I have supplied information which may be required by law enforcement agencies and other entities for positive identification purposes when checking records, including date of birth, residence history and driver's license number and Province.

Please include a 5-year Driver's Abstract along with the completed application form.

Applicant Signature

Date

Email the completed application to hr@caneda.com.

Caneda Transport Ltd. recognizes the potentially sensitive nature of the information requested and seeks to protect the privacy rights of all individuals about whom we hold personal data. Access to personal information will only be used for purposes directly related to an individual's employment with Caneda Transport Ltd. Any access, use, dissemination and/or disclosure of the information in a manner contrary to Federal and Provincial privacy laws constitutes an offence punishable by fine and/or imprisonment.