



Driver / Owner-Operator Application for Employment

Please complete the following application and return it to Wildwood Transport in-person, or via fax (204) 957-8860, or by email info@wildwoodtransport.com.

Name of Applicant: _____

Address: _____ Postal/zip code: _____

City: _____ Province or state: _____

Mailing address (if different from address): _____

Phone number: () _____ Fax number: () _____

Position applying for: _____

Have you worked for us before? Yes No If so, when: _____

How did you hear about us? Or who referred you? _____

Education

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

College: 1st yr 2nd yr 3rd yr 4th yr of _____

Name of last school attended: _____

Previous Employers

1) Company: _____

Location: _____

Phone Number: () _____ Fax Number: () _____

Contact Person: _____

Reason for leaving: _____

Worked for company from _____ (mm/dd/yy) to _____ (mm/dd/yy)

Were you subject to the Federal Motor Carriers Regulations (FMCRs) while employed? Y or N

Was it designated as a safety-sensitive function in any D.O.T. related mode, subject to alcohol and controlled substances testing? Y or N

Please continue on next page

Wildwood Transport Inc.



2) Company: _____

Location: _____

Phone Number: (____) _____ Fax Number: (____) _____

Contact Person: _____

Reason for leaving: _____

Worked for company from _____ (mm/dd/yy) to _____ (mm/dd/yy)

Were you subject to the Federal Motor Carriers Regulations (FMCRs) while employed? Y or N

Was it designated as a safety-sensitive function in any D.O.T. related mode, subject to alcohol and controlled substances testing? Y or N

3) Company: _____

Location: _____

Phone Number: (____) _____ Fax Number: (____) _____

Contact Person: _____

Reason for leaving: _____

Worked for company from _____ (mm/dd/yy) to _____ (mm/dd/yy)

Were you subject to the Federal Motor Carriers Regulations (FMCRs) while employed? Y or N

Was it designated as a safety-sensitive function in any D.O.T. related mode, subject to alcohol and controlled substances testing? Y or N

Driving Experience and Qualifications

Driver's license	Province	License #	Expiry Date (mm/dd/yy)	Type/Class
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Have you ever been denied a license? Yes or No If yes, explain: _____

Driving Record (for the past three years)

Date (mm/dd/yy) _____ Type of Incident: _____ Injuries? Y or N

If yes, please explain: _____

Please continue on next page

Wildwood Transport Inc.



Date (mm/dd/yy) _____ Type of Incident: _____ Injuries? Y or N

If yes, please explain: _____

Date (mm/dd/yy) _____ Type of Incident: _____ Injuries? Y or N

If yes, please explain: _____

Experience with Equipment

Straight truck: _____ From (mm/dd/yy) _____ to _____ approx. mileage _____

Tractor/semi-trailer: _____ From (mm/dd/yy) _____ to _____ approx. mileage _____

Other: _____ From (mm/dd/yy) _____ to _____ approx. mileage _____

Provinces/states driven in the last five years;

List any trucking or transportation experience; _____

List any courses, technical training, or special equipment you can operate that may help in your job;

I authorize Wildwood Transport Inc. to contact any person or company that I have listed on my resume or job application and obtain from them any relevant information regarding my job qualifications.

I also authorize Wildwood Transport Inc. to make investigations and inquiries into my personal, educational, medical, and criminal background histories in order to arrive at an employment decision.

I also understand that I am consenting to the release of safety performance information including crash data from the previous five years and inspection history from the previous three years.

I have read the above statements and I understand that by signing this form I am consenting to Wildwood Transport Inc. obtaining all background information required for them to make an employment decision. I agree not to file any complaints or pursue legal action against any person or company that has supplied work-related information to Wildwood Transport Inc. or against Wildwood Transport and its employees or representatives.

(Date – mm/dd/yy)

(Signature)

(Print Name)

Wildwood Transport Inc.