



**INDEPENDENT CONTRACTOR QUALIFICATION APPLICATION**

**Please Print**

Name : \_\_\_\_\_ S.I.N. Number \_\_\_\_\_

Address : street \_\_\_\_\_ City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_ How Long \_\_\_\_\_ Yrs.

Prev.Address : Street \_\_\_\_\_ City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_ How Long \_\_\_\_\_ Yrs.

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Emergency \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_

Total Years Tractor/Trailer Driving Experience \_\_\_\_\_ Approx. Total Tractor/Trailer Miles Driven \_\_\_\_\_ Approx. Total Miles Pulling SB Trailer \_\_\_\_\_

Experience : Eastern Seaboard \_\_\_\_\_ Canada \_\_\_\_\_ Rocky Mountains \_\_\_\_\_ USA \_\_\_\_\_ Border Qualifications : PassPort \_\_\_\_\_ Fast Card \_\_\_\_\_ Bondable \_\_\_\_\_

If Incorporated Name and/or Number : \_\_\_\_\_ How Long \_\_\_\_\_ Yrs.

Manitoba WCB Number \_\_\_\_\_ Ontario WSIB Number \_\_\_\_\_

Date Available to Start Work \_\_\_\_\_ Year & Make of Tractor \_\_\_\_\_ Year & Make of Trailers \_\_\_\_\_

**WORK / EMPLOYMENT HISTORY FOR PAST 10 YEARS ( Start with Current/Last Employer )**

Company Name \_\_\_\_\_ City & Prov. \_\_\_\_\_ Contact : \_\_\_\_\_ PH : ( \_\_\_\_\_ ) \_\_\_\_\_

Start Date : \_\_\_\_\_ To \_\_\_\_\_ Position : \_\_\_\_\_ Reason for Leaving : \_\_\_\_\_ Fx : ( \_\_\_\_\_ ) \_\_\_\_\_

Company Name \_\_\_\_\_ City & Prov. \_\_\_\_\_ Contact : \_\_\_\_\_ PH : ( \_\_\_\_\_ ) \_\_\_\_\_

Start Date : \_\_\_\_\_ To \_\_\_\_\_ Position : \_\_\_\_\_ Reason for Leaving : \_\_\_\_\_ Fx : ( \_\_\_\_\_ ) \_\_\_\_\_

Company Name \_\_\_\_\_ City & Prov. \_\_\_\_\_ Contact : \_\_\_\_\_ PH : ( \_\_\_\_\_ ) \_\_\_\_\_

Start Date : \_\_\_\_\_ To \_\_\_\_\_ Position : \_\_\_\_\_ Reason for Leaving : \_\_\_\_\_ Fx : ( \_\_\_\_\_ ) \_\_\_\_\_

Company Name \_\_\_\_\_ City & Prov. \_\_\_\_\_ Contact : \_\_\_\_\_ PH : ( \_\_\_\_\_ ) \_\_\_\_\_

Start Date : \_\_\_\_\_ To \_\_\_\_\_ Position : \_\_\_\_\_ Reason for Leaving : \_\_\_\_\_ Fx : ( \_\_\_\_\_ ) \_\_\_\_\_

**Please Read Carefully And Sign** : I hereby certify that the above information is true and correct, to best of my knowledge. I hereby state that I have read and understood the contents of this consent to release personal information and authorize Armada Transport Inc. to investigate and gather personal information on the signed applicant for reasons of employment. I declare that this consent has been given voluntarily.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_