



#218 – 12448 – 82nd Avenue
 Surrey, British Columbia
 Canada, V3W 3E9

Toll Free: 1-877-572-3356
 Phone: 604-572-3356
 Fax: 604-572-3357
 Email: raieexpress@telus.net

DRIVER EXPERIENCE AND QUALIFICATION

Licenses

Province/State	License No.	Class	Endorsement(s)	Expiration Date

- A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes _____ No _____
 B. Has any license, permit or privilege ever been suspended or revoked? Yes _____ No _____
 C. Have you ever been disqualified for violations of the Federal Motor Carrier Safety Regulations? Yes _____ No _____

If you answered, “yes” to A, B, or C attach a statement giving details.

Driving Experience

Class of Equipment	Type of Equipment (Van, Tank, Flat, etc)	Dates		Apprx. Total Miles
		From	To	
Tractor Trailer				
Other				

List provinces/states operated in during the last five years _____

List special courses or training that will help you as a driver _____

List driving awards and who awards were presented by _____

Accident Review for the last 3 years (Attach separate sheet of paper if more space is needed)

Dates	Nature of Accident (Head-on, Rear-end, Overturn,ect)	Fatalities	Injuries
Last Accident			
Next Previous			
Next Previous			

Traffic Convictions and Forfeitures for the past 3 years other than parking violations

Location	Date	Charge	Penalty

EMPLOYMENT RECORD

Rai Express Lines Ltd. Inc. is required to verify the employment background of all prospective drivers for the preceding ten years. You must account for all periods of your employment history, or periods when you were not employed, which cannot be verified by any other means. Complete, accurate information must be provided-attach a separate sheet of paper if necessary.

Current Employer: _____	Supervisor’s Full Name: _____
Full Address: _____	Phone: _____
Street _____	City _____
Province/State _____	Zip _____
Position Held: _____	From: Month/Year _____ To: Month/Year _____ Salary: _____
Reason for Leaving: _____	

1. Period of Unemployment or Unverifiable Employment (if any): From: Month/Year _____ To: Month/Year _____

Comments: _____



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Current Employer: _____ Supervisor's Full Name: _____
 Full Address: _____ Phone: _____
 Street City Province/State Zip
 Position Held: _____ From: Month/Year _____ To: Month/Year _____ Salary: _____
 Reason for Leaving: _____

2. Period of Unemployment or Unverifiable Employment (if any): From: Month/Year _____ To: Month/Year _____

Comments: _____

Current Employer: _____ Supervisor's Full Name: _____
 Full Address: _____ Phone: _____
 Street City Province/State Zip
 Position Held: _____ From: Month/Year _____ To: Month/Year _____ Salary: _____
 Reason for Leaving: _____

3. Period of Unemployment or Unverifiable Employment (if any): From: Month/Year _____ To: Month/Year _____

Comments: _____

Current Employer: _____ Supervisor's Full Name: _____
 Full Address: _____ Phone: _____
 Street City Province/State Zip
 Position Held: _____ From: Month/Year _____ To: Month/Year _____ Salary: _____
 Reason for Leaving: _____

4. Period of Unemployment or Unverifiable Employment (if any): From: Month/Year _____ To: Month/Year _____

Comments: _____

Current Employer: _____ Supervisor's Full Name: _____
 Full Address: _____ Phone: _____
 Street City Province/State Zip
 Position Held: _____ From: Month/Year _____ To: Month/Year _____ Salary: _____
 Reason for Leaving: _____

5. Period of Unemployment or Unverifiable Employment (if any): From: Month/Year _____ To: Month/Year _____

Comments: _____



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Current Employer: _____		Supervisor's Full Name: _____	
Full Address: _____		Phone: _____	
Street	City	Province/State	Zip
Position Held: _____		From: Month/Year _____	To: Month/Year _____ Salary: _____
Reason for Leaving: _____			

6. Period of Unemployment or Unverifiable Employment (if any): From: Month/Year _____ To: Month/Year _____

Comments: _____

APPLICANT MUST READ AND SIGN

I certify that I have read and understood all of this employment application. It is agreed and understood that the employer or his agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not and I release employers and other persons named herein from all liability for any damages on account of furnishing such information. I understand that, as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks, which are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and drug test.

I further certify that I am a genuine applicant for employment and this application is being submitted solely for the purpose of seeking employment with the employer and for no other reason.

I agree to furnish such additional information and complete such examinations as may be required to complete my employment file. I also understand the misrepresentation or omission of information or facts may result in my rejection or dismissal.

If hired, I agree to abide by all the rules and policies of the employer.

I EXPRESSLY ACKNOWLEDGE AND UNDERSTAND THAT IN THE ABSENCE OF WRITTEN CONTRACT TO THE CONTRARY, MY STATUS, IF I AM HIRED, WILL BE THAT OF AN EMPLOYEE AT WILL, HAVING NO CONTRACTUAL RIGHT, EXPRESS OR IMPLIED, TO REMAIN IN THE COMPANY'S EMPLOY. IN THIS CONNECTION, I EXPRESSLY ACKNOWLEDGE FURTHER THAT NEITHER ANYTHING SAID TO ME DURING THE COMPANY'S APPLICATION AND/OR INTERVIEW PROCESS OR DURING EMPLOYMENT NOR ANY PROVISION IN THE COMPANY'S POLICIES OR EMPLOYEE MANUAL CONSTITUTES THE TERMS OF AN EXPRESS OR IMPLIED EMPLOYMENT AGREEMENT. In consideration of any employment offered, I specifically agree that my employment may be terminated, with or without cause or notice, at any time, at the option of either the Company or myself. I understand that no unauthorized representative may enter into any agreement for employment or make any agreement contrary to the foregoing.

Date

Applicant Signature