



Employment Application form Tok Transit

Type of employment desired: Full-time [] Part-time []

Position(s) applied for:

Operator / Office / Supervisory / Technician / Apprentice / Other _____

Personal Information

Name _____

Address _____

Telephone Number (Home) _____ (Cell) _____ Email _____

Driver's licence # _____ Licence Class _____ Valid Until _____

Employment History (In order of most recent employment)

1. Employer Name _____ Position _____

Start Date _____ Finish Date _____ Reason for Leaving _____

Supervisor Name _____ Telephone # _____ Annual Income _____

2. Employer Name _____ Position _____

Start Date _____ Finish Date _____ Reason for Leaving _____

Supervisor Name _____ Telephone # _____ Annual Income _____

3. Employer Name _____ Position _____

Start Date _____ Finish Date _____ Reason for Leaving _____

Supervisor Name _____ Telephone # _____ Annual Income _____

4. Employer Name _____ Position _____

Start Date _____ Finish Date _____ Reason for Leaving _____

Supervisor Name _____ Telephone # _____ Annual Income _____

Education

CIRCLE HIGHEST GRADE COMPLETED: 9 10 11 12 13 COLLEGE/UNIVERSITY 1 2 3 4 5

Last School Attended _____ Year Completed _____

Tokmakjian Group

Executive Office • 221 Caldari Road • Concord • Ontario • Canada • L4K 3Z9

Tel: 905.738.7830 • Fax: 905.669.2958



Experience and Other Qualifications

List Other Courses, Training or Certifications _____

List Experience with Vehicles and Equipment _____

Are you eligible to work in Canada? No Yes

Do you have a conviction for a criminal offence for which a pardon has not been granted? No Yes
(A Criminal conviction does not necessarily disqualify you from the position)

Have you ever been denied a licence to operate a motor vehicle? No Yes
Has your licence ever been suspended or revoked? No Yes

Please report all collisions, preventable, non-preventable, on-road or on a private property in last 5 years

Date _____ Details _____

Date _____ Details _____

Date _____ Details _____

Please report all traffic convictions and citations for the past 5 years (Other than parking violations)

Date _____ Details _____

Date _____ Details _____

Date _____ Details _____

TO BE READ AND SIGNED BY APPLICANT

This certifies that I completed this application and that all entries on it and information in it are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision.

(Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been extended.)

I hereby release employers, schools, health-care providers and other persons from all liability in responding to inquiries and releasing information in connection with my application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I further understand that I am required to abide by all rules and regulations of the Company.

Date _____

Signature _____

With this application, please supply the following:

Current Driver Abstract Current Resumé Copies of Certificates

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