

**1301540 ALBERTA LTD. o/a WERKMAN TRANSPORT  
DRIVER PROFILE SURVEY**

**DRIVER INFORMATION**

Name:		Date of Birth:
License #:	License Class:	Issuing Province:
Date License originally obtained:		Total # of years commercial driving:

**DRIVING POSITION BEING OFFERED\EMPLOYED**

<b>Name of the Trucking Company for whom you will be driving:</b> 1301540 Alberta Ltd. o/a Werkman Transport <b>Type of vehicles will you be required to operate:</b> Tractor and/or Trailer (53' Walking Floor Trailer) <b>Types of product loads that will form part of your current/proposed employment:</b> Bulk Dry Goods - Bark Mulch, Peat Moss, Recycled Tires, Hog Fuel, Wood Chips
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**PREVIOUS DRIVING QUALIFICATIONS**

What type of vehicles have you actually driven for commercial employment?		
Tractor Trailer	yes/no	how many years? _____
Straight Truck with trailer	yes/no	how many years? _____
Straight Truck without trailer	yes/no	how many years? _____
Light Commercial Vehicle	yes/no	how many years? _____
Have you qualified for or obtained the C.T.H.R.C. "Earning Your Wheels" certificate? (please provide a photocopy)		yes/no
Have you qualified for or obtained a certified P.T.D.I. driver training course? (please provide a photocopy)		yes/no
Have you qualified for or obtained any other professional truck driver training course? (please provide a photocopy as well as the name and address of the training facility)		yes/no

**CLAIMS HISTORY**

Have you had any "at fault" accidents during the last 3 years?                      yes/no

**IF YES, PLEASE COMPLETE TABLE BELOW, OTHERWISE THIS DRIVER PROFILE FORM WILL NOT BE ACCEPTED.**

Date of Accident	Describe Event & Location	% "at fault"
Comments:		

**Declaration**

I certify that all of the information is true and correct. I authorize WERKMAN TRANSPORT'S CURRENT INSURANCE PROVIDER to complete background investigation including obtaining a current Drivers Abstract in accordance with provincial and federal laws. I authorize my previous years employers to release any information requested by WERKMAN TRANSPORT'S CURRENT INSURANCE PROVIDER and hold them harmless of all liability from the release of said information. I certify that I am legally entitled to work as a truck driver according to all provincial, state and federal laws pertaining to age, medical condition, drug testing requirements, immigration or work entitlement status in each jurisdiction required by my current/proposed employment.

\_\_\_\_\_  
Please print your name

\_\_\_\_\_  
Signature of driver

\_\_\_\_\_  
Date of signature

**PREVIOUS DRIVING EMPLOYMENT INFORMATION** (please provide at least 4 years history to get best available driver rating)

<b>Past Employer 1</b>			
Company Name and Address:		Phone Number:	
		Supervisor Name:	
Employment Start Date:		Employment End Date:	
What type of vehicles did you operate most often for this employer:			
Tractor Trailer	yes/no	Straight Truck with trailer	yes/no
Straight Truck without trailer	yes/no	Light Commercial Vehicle	yes/no
Please indicate if your driving position with this employer required you to operate in any of the following situations;			
Bulk Liquids	yes/no	Train configurations	yes/no
Float type trailers	yes/no	Drop-type trailers	yes/no
Carrying logs or pulpwood	yes/no	Operating in the woodlands	yes/no
Operating in the oilfields	yes/no	Livestock	yes/no
Hauling steel products	yes/no	Hauling sand, gravel, earth or stone	yes/no
Hauling oversized loads	yes/no	Hauling overweight loads	yes/no

<b>Past Employer 2</b>			
Company Name and Address:		Phone Number:	
		Supervisor Name:	
Employment Start Date:		Employment End Date:	
What type of vehicles did you operate most often for this employer:			
Tractor Trailer	yes/no	Straight Truck with trailer	yes/no
Straight Truck without trailer	yes/no	Light Commercial Vehicle	yes/no
Please indicate if your driving position with this employer required you to operate in any of the following situations;			
Bulk Liquids	yes/no	Train configurations	yes/no
Float type trailers	yes/no	Drop-type trailers	yes/no
Carrying logs or pulpwood	yes/no	Operating in the woodlands	yes/no
Operating in the oilfields	yes/no	Livestock	yes/no
Hauling steel products	yes/no	Hauling sand, gravel, earth or stone	yes/no
Hauling oversized loads	yes/no	Hauling overweight loads	yes/no

<b>Past Employer 3</b>			
Company Name and Address:		Phone Number:	
		Supervisor Name:	
Employment Start Date:		Employment End Date:	
What type of vehicles did you operate most often for this employer:			
Tractor Trailer	yes/no	Straight Truck with trailer	yes/no
Straight Truck without trailer	yes/no	Light Commercial Vehicle	yes/no
Please indicate if your driving position with this employer required you to operate in any of the following situations;			
Bulk Liquids	yes/no	Train configurations	yes/no
Float type trailers	yes/no	Drop-type trailers	yes/no
Carrying logs or pulpwood	yes/no	Operating in the woodlands	yes/no
Operating in the oilfields	yes/no	Livestock	yes/no
Hauling steel products	yes/no	Hauling sand, gravel, earth or stone	yes/no
Hauling oversized loads	yes/no	Hauling overweight loads	yes/no