

## REQUEST FOR INFORMATION FROM PREVIOUS EMPLOYER

Company \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_

Position \_\_\_\_\_

Dear Sir or Madam:

The following individual has applied for a driving position with our Company. His application indicates he was previously employed with you. Would you kindly provide the information requested below? This information will be kept in the strictest of confidence. We appreciate your co-operation,

Sincerely,

Name \_\_\_\_\_

Position \_\_\_\_\_

Company: **F&G Delivery Ltd.**

Address: **9324 – 192<sup>nd</sup> Street, Surrey, BC, V4N 3R8**

Telephone: **604-888-5196** Fax: **(604) 888-4164**

I, \_\_\_\_\_ authorize you to release the following information to F&G Delivery Ltd. For investigative purposes. You are released from any and all liability, which may result from providing any information.

\_\_\_\_\_  
Date

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

Name of Applicant \_\_\_\_\_ S.I.N. \_\_\_\_\_

Employed as \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

Was he/she reliable \_\_\_\_\_ Yes \_\_\_\_\_ No

What was his/her attitude toward:

Customers? \_\_\_\_\_ Fellow Workers? \_\_\_\_\_

Management? \_\_\_\_\_ Equipment? \_\_\_\_\_

Number of accidents while employed? \_\_\_\_\_ Preventable \_\_\_\_\_ Non Preventable \_\_\_\_\_

Dates of last two accidents? \_\_\_\_\_

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Type of Equipment Operated? Sm Vehicle \_\_\_\_\_ 1Ton Flat/Van \_\_\_\_\_ SAF Up to 30' \_\_\_\_\_

TAF Up to 30' \_\_\_\_\_ Van \_\_\_\_\_ Flat Deck \_\_\_\_\_ Trains A \_\_\_\_\_ Trains B \_\_\_\_\_ Reefer \_\_\_\_\_

Hiab Size \_\_\_\_\_ Stinger \_\_\_\_\_ Tractor Mounted \_\_\_\_\_ Other \_\_\_\_\_

Does this individual have experience running mountains? Yes \_\_\_\_\_ No \_\_\_\_\_

Does this individual have experience running in the U.S.? Yes \_\_\_\_\_ No \_\_\_\_\_

Does this individual have experience running double? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you aware of any border crossing problems this individual may have? Yes \_\_\_\_\_ No \_\_\_\_\_

Characteristics	Excellent	Good	Fair	Poor
Safety Habits				
Driving Habits				
Attitude to Others				
Work Ethics				
Paperwork				
Disposition & Tact				
Customer relation				

What was his/her reason for leaving? \_\_\_\_\_

Would you rehire him/her? \_\_\_\_\_

Explanation: \_\_\_\_\_

Is your company aware of any alcohol or substance abuse problems? Yes \_\_\_\_\_ No \_\_\_\_\_

Is your company aware of any health problems? Yes \_\_\_\_\_ No \_\_\_\_\_

Did this individual have any Compensation Claims? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what and when? \_\_\_\_\_

Can this individual manage money on the road? Yes \_\_\_\_\_ No \_\_\_\_\_

Does this individual require excessive time off? Yes \_\_\_\_\_ No \_\_\_\_\_

Was his/her general appearance satisfactory? Yes \_\_\_\_\_ No \_\_\_\_\_

Additional Comments \_\_\_\_\_

Reference Check Done By: \_\_\_\_\_ Date \_\_\_\_\_