

	Date of Application	
Name:	Phone:	
Name:		
Email Address:		
Address:		
DOB: Month DayYear		
Experience: Please provide at minimum tha	ıt last 5 years	
Current Employer:		
Name		
Address		
Employed From	to	
Reason for leaving		
Description of good hauled		
Supervisor's Name and phone number		
Employer:		
Name		
Address		
Employed From	to	
Reason for leaving		
Description of goods hauled		
Supervisor's Name and phone number		

Employer:	
Name	
Address	
Employed From to	
Reason for leaving	
Description of goods hauled	
Supervisor's Name and phone number	
Are you willing and able to work in all Canadian Proving	nces?() Yes ()No
If No list and explain	
Are you willing and able to cross border for USA runs If No list and explain	
Are you willing and able to work weekends () Yes (() No
If No list and explain	
References:	
1. Name	_
Phone Number :	
Company:	_
2. Name	_
Phone Number :	
Company:	_
3. Name	_
Phone Number :	_
Company:	_

I, employers and/or references in regards	Authorize Longhorn Transportation Inc to contact any of the listed to my employment
X	
() I have attached a current abstract	
Please send resume and abstract to:	
info@longhorntransportation.com or fax	(506) 887-2616