



**Request/Consent for Information From Previous Employer**  
**SECTION 1: To Be Completed By Prospective Employee**

I, \_\_\_\_\_ Social Insurance Number \_\_\_\_\_  
 First, Middle, Last

**HEREBY AUTHORIZE THAT:**

PREVIOUS EMPLOYER: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
 CITY, STATE, ZIP: \_\_\_\_\_

may release and forward information requested in section 2 (below) of this document concerning my employment record (including oral assessments of my job performance, ability and fitness) to the Company below. I hereby release all Companies (and their agents) from any and all liability of any type as a result of providing the below mentioned information to. In accordance with FMCSR Section 391.23, Jakait Express Inc. is obligated to request the information below from all previous employers of the applicant that employed the driver to operate a commercial motor vehicle.

**JAKAIT EXPRESS INC.**

**1966 Road 3 East, Kingsville, ON, N9Y 2E5**

**PO Box 374, Ruthven, ON N0P 2G0**

**PHONE: 519-325-1312      SECURE FAX: 519-325-0150**

\_\_\_\_\_  
 APPLICANT SIGNATURE

\_\_\_\_\_  
 DATE

**SECTION 2: TO BE COMPLETED BY PREVIOUS EMPLOYER**

Personnel/Safety Manager:

The person named above has applied to this company for employment and your firm is listed by the applicant as a past employer. Will you kindly reply to this inquiry. The applicant has waived any claim of liability against all Companies (and their agents) for information submitted in response to this inquiry.

Very Truly Yours  
 Jakait Express Inc.

- This applicant lists dates of employment with your firm from \_\_\_\_\_ to \_\_\_\_\_  
**YES**  **NO**  If NO, please explain: \_\_\_\_\_
- Did he/she drive commercial motor vehicles for you? **YES**  **NO**   
 If YES, what type: **Straight Truck**  **Tractor Trailer**   
 Trailer Experience: **Van**  **Reefer**  **Flat**  **Dump**  **Tank**  **Other**  \_\_\_\_\_  
 Mountain Experience: **YES**  **NO**

3. Cargo Experience: **General Freight**  **Frozen Goods**  **Produce**  **Steel**   
**Lumber**  **Pipe**  **Automobiles**  **Machinery**

4. Number of Accidents in last 3 years - check here if none

DATES	DESCRIPTION & LOCATION	# OF INJURIES	# OF FATALITIES	HAZMAT SPILL	DRIVER TICKETED

5. Any DOT Violations or Moving Violations in the last 3 years: YES  NO  If Yes, please explain: \_\_\_\_\_

6. Cargo Experience: **Ontario**  **Quebec**  **CDN East Coast**  **CDN West Coast**   
**US East Coast**  **US South**  **US Midwest**  **US West Coast**  **Mexico**

7. Any problems with dispatch, customer relations, supervision, abuse of equipment, customs violations (including CTPAT, PIP), etc.:

8. Why did this employee/contractor leave your Company? **Resigned**  **Discharged**   
**Laid Off**  **OTHER:** \_\_\_\_\_

9. Would you re-employ this person? **YES**  **NO**  Please explain: \_\_\_\_\_

**SECTION 3: TO BE COMPLETED BY PROSPECTIVE EMPLOYER**

This form was  **Faxed to Previous Employer**  **Mailed**  **OTHER:** \_\_\_\_\_

Date: \_\_\_\_\_

Complete below when information is obtained:

Information received from: \_\_\_\_\_ Method: Fax  Mail  Phone

Recorded by: \_\_\_\_\_ Date: \_\_\_\_\_