



10-12 Keefer Rd.
 St.Catharines, Ontario
 L2M 7N9
 Telephone: 905- 934-1124
 Fax: 905- 934-5775
 Mail postmaster@dannel.on.ca

DAN NEL COACH LINES LTD.

Monitor Employment Application

APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		Prov.		PC	
Phone		Alt. Phone			
Date Available		Social Security No.		Email	
Do you realize this is a part time job?					
Are you a citizen of the Canada?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the Canada?	
				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Wage expected		Date of Birth:			
Are you currently collecting CPP?					
EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Do you have First Aid training?					
Do you have a Police Clearance Certificate?					
Person to contact in case of emergency:				Telephone #:	
REFERENCES					
<i>Please list three professional or personal references.</i>					
Full Name			Relationship		
Company			Phone ()		
Address					
Full Name			Relationship		
Company			Phone ()		
Address					

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date