



TORONTO TRANSIT COMMISSION

File Reference No. _____

Wheel-Trans Operator Employment Application

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Resumé Attached

Date: _____

**Complete All Sections of the Application Form in your own handwriting.
Incomplete applications will not be accepted. This application is retained for 12 months.**

Last Name	First Name	Initial	Home Telephone No.
Home Address (no. and street)		Apt. No.	Alternate Telephone No.
City	Province	Postal Code	Email Address

Are you available to work:

Shifts Yes No Weekends/Holidays Yes No Split Shifts (4 hours on, 4 hours off, 4 hours on) Yes No

Have you ever been employed by the TTC? Yes No Dates Employed _____ Department _____ Empl. No. _____

Have you ever applied for the Transit Operator position before? Yes No If so, when? Month: _____ Year: _____

Are you legally entitled to work in Canada? Yes No Have you ever been convicted of a criminal offence for which a pardon has not been granted? Yes No

Have you ever attended one of the TTC's Preliminary Sessions for Operators in the past? Yes No If Yes, when? _____

Have you ever been interviewed for this position in the past? Yes No If Yes, when? _____

Do you have a valid Ontario Driver's Licence? Yes No If Yes, what class of Ontario Driver's Licence do you have? How many demerit points do you currently have?

Describe your driving experience (include personal and/or work related experience):

Approximately how many kilometres did you drive in the last year? _____

Do you have any experience in dealing with persons with disabilities? Yes No

Describe your experience in dealing with persons with disabilities:

Education History

Do you have a Grade 12 Secondary School Diploma or the equivalent? Yes No

Level of Education	Courses Studied	Graduated		Certificate/Diploma/Degree
		Yes	No	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

List any other Skills, Certificates, Training or Courses which may be relevant:

Employment History : Start with the most recent position. List all periods of employment.

1	Name of Employer	Telephone No.	Start Date
	Address		Date Left
Your Position		Name of Supervisor	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Duties and Responsibilities			
Reason for Leaving			OK to Check Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No

2	Name of Employer	Telephone No.	Start Date
	Address		Date Left
Your Position		Name of Supervisor	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Duties and Responsibilities			
Reason for Leaving			OK to Check Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No

3	Name of Employer	Telephone No.	Start Date
	Address		Date Left
Your Position		Name of Supervisor	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Duties and Responsibilities			
Reason for Leaving			OK to Check Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No

4	Name of Employer	Start Date
	Address	
Your Position		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Duties and Responsibilities		
Reason for Leaving		OK to Check Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No

Please note that the Toronto Transit Commission will do education, work, security and reference checks which will be used for employment assessment purposes only. These checks may include a check into criminal offences. In such cases, you will be required to sign a waiver form. Please note further, that any offer of employment is conditional upon positive work and reference checks and completion of a pre-placement health assessment relative to the position.

The information I have provided is correct to the best of my knowledge and I understand that any misrepresentation may disqualify me from employment or may cause my dismissal.	Signature	Date
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Personal information is collected under the authority of the *City of Toronto Act, 2006, S.O. 2006, c.11, Schedule A*, including but not limited to Part XVII, and the *Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M.56*. This information is used to determine eligibility for employment. Questions about this collection should be directed to:

THE EMPLOYMENT OFFICE
 1138 Bathurst Street
 Toronto, Ontario,
 M5R 3H2 or fax to: 416-397-8307

— THANK YOU FOR INTEREST IN THE TORONTO TRANSIT COMMISSION —
AN EQUAL OPPORTUNITY EMPLOYER