



Canoe Outpost-Peace River, Inc.

2816 NW County Rd. 661, Arcadia, FL 34266

800-268-0083, 863-494-1215, 863-494-4391f

www.canoeoutpost.com peacepaddler@canoeoutpost.com

Employment Application

Job Description: CDL Driver/Canoe Carrier

All CDL Drivers are required to have the following:

- Current State of Florida Class A or B Florida Commercial Driver License with a good driving record. MVR will be checked by company.
- CDL Passenger Endorsement. Canoe Outpost-Peace River can assist in getting the driving portion of the Passenger Endorsement. Must pass written part of CDL Passenger test before attempting driving portion. Applicant pays all fees for Passenger Endorsement.
- Federal Motor Carrier Safety Regulation Drug Test, passed and completed. Applicant will be reimbursed the cost of the drug test if hired.
- Current FDOT Medical Card. Applicant pays all fees for Medical Card

Note: All actions for this job description require the ability to handle canoes, kayaks, vehicles, and other equipment essential to the operation of a canoe livery, canoe outfitter, and/or nature-based attraction. These abilities include walking, bending, jumping, running, stepping up and down, movement of arms and hands in all directions, good hearing, good eyesight, good public relations, neat appearance, and the ability to be in the outdoors to ensure the enjoyment and safety of the paddling public.

Other Job Requirements:

- **Must be able to work weekends and holidays.** Hours vary, on some days office opens at 5:00 a.m. Average start time is 7:30 or 7:45 dependent on season and day of week. Office is open until 5:00 p.m. weekdays and 6:00 p.m. weekends.
- All applicants must adhere to the requirements of the company dress code.
- Carry and load/unload paddlesport equipment and camping gear to and from vehicles, storage areas, put-in points and take-out points.
- Clean and maintain restrooms, offices, kitchen, restrooms, dressing rooms, and storage areas.
- Drive a vehicle with an attached trailer
- Assist customers at put-ins and take-outs.
- Participate in company -sponsored highway and river clean-up activities.
- Clean, maintain, prepare paddlesport equipment and camping gear for rental, storage, and/or repair
- Drive school buses and trucks with automatic and standard transmissions
- Pick up and carry 75-pound canoe/kayak by oneself and load/unload canoes on canoe trailers and vehicles.
- Manually maneuver and hook up canoe trailers and other trailers to buses, trucks and other vehicles.
- Carry canoes/kayaks up and down steep wooden steps, up and down sandy beaches, and up and down public and private boat ramps by oneself.
- Pick up canoes/kayaks from ground, water, and man-made structures by oneself.
- Carry and load/unload paddlesport and camping equipment to and from vehicles, storage areas, put-in points and take-out points.
- Operate push yard mower, riding mower, farm tractors, gas powered weed eater, chainsaw, pole tree saw, bow saw, ladders, brush hoe, shovels, rakes, limb loppers, and any other necessary equipment relevant to upkeep of grounds, on site and off site; pick up trash and yard trash (limbs); garbage collection and garbage disposal at dump on-site and off-site.
- Participate in General Maintenance duties such as sweeping of all buildings and walkways, prep and painting of vehicles and buildings, fence maintenance including building and repair. Duties also include some general carpentry, plumbing, and electrical skills that require the use of hand and power tools necessary to general construction, new and old.

Additional Preferred Skills: First Aid and CPR certification. Farm equipment knowledge. Gas and diesel powered vehicle and equipment maintenance experience.

I understand the duties and requirements for the above detailed job description and I am capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation that I have applied for: YES _____ NO _____ (select one).

Signed _____ Print Name _____ Date _____

This application will be kept on file for 12 months after the date above and after that date will be considered null and void.



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Driver Application		Page 1
Social Security #		
Contact Phone #		
Email Address:		
Date of Birth		

Personal Information			
Last Name	First Name	Middle Name	
Current Address	City	State	Zip Code
High School Graduate () Yes or () No	College: Number of years:	Other:	

Residence Past 3 Years				
Address	City	State	Zip Code	How Long?

License Information				
Section 383.21 FMCSR state "No person who operates a commercial motor vehicle shall at any time have more than one driver's license". I certify that I do not have more than one motor license, the current license and valid license is listed at the top in the form below. Previous license data for information purposes only.				
State	License #	Expiration Date	Class A,B	Endorsements

Driving Experience				
Equipment Class	Type: Van, Flat, Truck etc.	Dates/ From:	To:	Approx. Total Miles
Straight Truck				
Tractor Semi-Trailer				
Tractor with Doubles				
Tractor with Triples				
Tractor with Tank				
Other				

Accidents/Crashes for Past 3 Years (add additional info on page 4 if needed)			
Date	Nature of Accident: (Backing, Head-on, Rollover, Turning)	Fatalities	Injuries

Moving Traffic Convictions and Forfeitures for Past 3 Years (add additional info on page 4 if needed)			
Date of Conviction	Offense	Location	Type of Motor Vehicle Operated

Have you ever been denied a license, permit or privilege to operate a motor vehicle () Yes or () No

Has any license, permit, or privilege ever been suspended or revoked? () Yes or () No

Ever been convicted of a felony? () Yes or () No Are you currently on parole or probation? () Yes or () No

If yes to any of the above questions, attach statement giving details or use page 4 of application for details including jurisdiction

This company requires all Drivers who drive Commercial Motor Vehicles (CMV) which requires a Commercial Drivers License (CDL), to be controlled substance tested with a negative result prior to driving. Test is for Amphetamines, Cannabinoids (Marijuana, THC), Cocaine, Opiates (inc. Heroin, Phencyclidine (PCP)). **Do you consent to such Testing () Yes or () No**

This certifies that this application was completed by me, and that all the entries on it and information in it are true to the best of my knowledge.

Applicant's signature: _____ **Date:** _____



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Employment Record

Page 2

All for past 3 years and Commercial Driving Experience for the past 10 years.
Additional copies of Page 2 can be used.

Last Employer:			
Position Held:	CDL?	From:	To:
Address:	City, State, Zip Code		
Telephone #:	Fax Number #:		
Reason for Leaving:			
Were you subject to the Federal Motor Carrier Safety Regulations while employed: () Yes or () No			
Was your job designated as a safety sensitive function in any DOT regulated mode subject to the drug and alcohol testing requirements of 49CFR Part 40: () Yes or () No			

Last Employer:			
Position Held:	CDL?	From:	To:
Address:	City, State, Zip Code		
Telephone #:	Fax Number #:		
Reason for Leaving:			
Were you subject to the Federal Motor Carrier Safety Regulations while employed: () Yes or () No			
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Applicant Release of Records and Consent to Testing

All sections to be signed by applicant

TO BE READ AND SIGNED BY APPLICANT

Sec. 40.25(j) As the employer, you must also ask the employee whether he or she has tested positive or refused to test, on any pre-employment drug or alcohol test administered by an employer to which the employee applied for, but did not obtain, safety sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years.

If the employee admits that he or she had a positive test or a refusal to test, you must not use the employee to perform safety sensitive functions for you until and unless the employee documents successful completion of the return-to-duty process. (see Sec. 40.25 (b)(5) and (e).

The prospective employee is required by Sec. 40.25(j) to respond to the following questions.

1) Have you ever tested positive or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years?

Check One: Yes _____ No _____

2) If you answered yes, can you provide/obtain proof that you have successfully completed the DOT return-to-duty requirements?

Check One: Yes _____ No _____

This certifies that I completed this application, and that all entries, and information documented by me are true and complete to the best of my knowledge. **By my signature heretofore, I acknowledge having been given by this carrier which has presented me with this application, a statement of my right to due process as outlined by all parts of 49 CFR Part 391.23 of the Federal Motor Carrier Safety Regulations effective October 29, 2004.** Having made this acknowledgment, I therefore authorize you to make such previous employment and background investigations and inquires of my personal, employment, financial or medical history and other related matters as may be necessary to arrive at a possible employment decision. (Generally, inquires regarding medical history will be made only if and after a conditional offer of employment has been extended.) I understand that false or misleading information given in my application or interviews may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the company.

TO BE READ AND SIGNED BY APPLICANT

I authorize you to make sure investigations and inquiries to my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. (Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been extended.) I hereby release employers, schools, health care providers and other persons from all liability in responding to inquiries and releasing information in connection with my application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Company. "I understand that information I provide regarding current and/or previous employers may be used, and those employer(s) will be contacted, for the purpose of investigating my safety performance history as required by 49 CFR 391.23(d) and (e). I understand that I have the right to: Review information provided by current/previous employers; Have errors in the information corrected by previous employers and for those previous employers to re-send the corrected information to the prospective employer; and Have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information."

Applicant Signature: _____ Date: _____

Note: A motor carrier may require an applicant to provide information in addition to the information required by the Federal Motor Carrier Safety Regulations.

In conjunction with my potential employment at Canoe Outpost-Peace River, Inc. ("the company"), I, _____ (print applicant name) consent to the release of my Motor Vehicle Records (MVR) to the company. I understand the company will use these records in connection with matters of motor vehicle or driver safety that be related to the position for which I am applying. I may also consent to the review and evaluation of the MVR I have provided to the company and understand that the release of the MVR does not necessarily mean I will be hired for a driving or any other position.

This consent is given in satisfaction of Public Law USC 2721 et. Seq. "Federal Drivers Privacy Protection Act" and is intended to constitute "written consent" as required by this Act.

Applicant Signature: _____ Date: _____

