



Date: \_\_\_\_\_ Employee Number: \_\_\_\_\_

Routes approved for:

#1 \_\_\_\_\_ #2 \_\_\_\_\_

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**Applicants Information**

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Social Insurance Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

E-mail: \_\_\_\_\_

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Surname	First Name	Initial(s)	Phone Number
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Address (No, Street, City, Postal Code)

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Parent/Guardian Name (If under 16)	Relationship to Child
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Applicants Signature

Parent/Guardian Signature

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**For Office use only**

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Number of Papers: \_\_\_\_\_

Regular Pay: \_\_\_\_\_ x 0.13 cents = \$ \_\_\_\_\_

(Inserts are 0.02 extra on pay)



## Carrier Hiring Agreement

### Delivery guidelines

1. Deliver The Aurora Newspaper before 8 p.m. on the day received, or on the publication date, to all addresses on your route, unless informed by The Aurora Newspaper office.
2. Secure the newspaper between screen and entrance doors or door knobs, or use mailboxes or slots. During bad weather, use recycled bags; or, call The Aurora Newspaper, (902) 765-1494 local 5440, for bags.
3. Where delivery is not possible (locked gates, doors, unfamiliar dogs/ animals, snowy conditions), write down the address and notify the office upon completing your route.
4. Contact The Aurora Newspaper if an occupant does not want delivery. The office has Stop Delivery stickers you may pick up if requested by the occupant; or, occupants will get the stickers themselves. These addresses will be tracked by the office and relayed to you.
5. Contact The Aurora Newspaper if occupants move out/ in so the route list and pay can be adjusted: it is your responsibility to inform The Aurora Newspaper of these changes.
6. Contact The Aurora Newspaper if you will miss a delivery date or are taking vacation, etc. It is your responsibility to find a replacement carrier, and notify the office of such a change.
7. Advise our office, two weeks in advance, if you do not want to continue as a carrier.
8. Read, sign (parent/ guardian signature required if carrier is under age 16) and have a witness sign the “Aurora Newspaper Carrier 14 Wing Greenwood Waiver of Liability, Assumption of Risks, and Indemnification Agreement.”

### Pay

1. Pay is based on the number of papers per route; extra pay is given for inserts.
2. Pay will be withheld for one week after the delivery of your first paper route.

Please sign and date this to show that you have understood and accept the guidelines.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Parent/ guardian signature (if applicant under age 16): \_\_\_\_\_