



Beeline Community Transport & Wellbeing Hub (SC046512) - Volunteer Driver Information Form

This form is confidential and will be stored in line with our GDPR Policy

A) PERSONAL DETAILS:

SURNAME: D.O.B

OTHER NAMES: Mr / Mrs / Miss Other

ADDRESS: POSTCODE:

TELEPHONE: (Daytime) (Evening)

MOBILE NO.

EMAIL ADDRESS

Emergency Contact.....

B) AVAILABILITY

Please provide details of potential availability

able to drive (✓or X)	Car only (automatic)		Bus only (D1 licence)		Both	
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	AM start time	AM finish time	PM start Time	PM finish time	Evening start time	Evening finish time
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						

*This is only to provide guidance for planning, you are not committed by filling this in. Further contact will be made to make arrangements for any potential driving.

Let us know if you are happy to be considered for any ad hoc type driver needs.....

C) VOLUNTEER DRIVER DETAILS:

Driving Licence No: _____

Valid from: _____ to: _____

Group entitlement (categories of vehicles dated on reverse of licence to highlight entitlement, e.g. D1) _____

Years licence held: _____

Do you have any licence endorsements? YES / NO

If YES give details & year: _____

Have you had any convictions during the past 5 years for an offence in connection with a motor vehicle? YES / NO

If YES give details & year: _____

Have you ever been refused motor insurance? YES / NO

If YES give details _____

Have you been involved as a driver in an accident in the past 5 years? YES / NO

If YES give details _____

Please give details of any additional licences held (HGV, PSV, CT test):

General Health: Please give information of any condition or disability you have or have had which would affect your ability to drive safely now or in the future.

Details: _____

A PVG scheme check will be carried out for this voluntary position.

For people working with vulnerable groups, the Rehabilitation of Offenders Act (1974), Exemption order (1975) does not apply. You must declare below any convictions 'spent' or not. Please note: Disclosure of criminal convictions will not necessarily exclude you from becoming a volunteer. Please do not be put off applying!

CONVICTIONS DATES

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DECLARATION:

I declare that the details given on this form are correct to the best of my knowledge. I agree to exercise all due care for the safety of my passengers and the security of the vehicle whilst it is in my charge. I understand that it is an offence under the Road Traffic Act to knowingly make a false statement to obtain insurance cover. I undertake to inform Beeline Community Transport & Wellbeing Hub contact person of any subsequent illness, condition or event which might affect my ability to drive the minibus and also of any subsequent refusal of motor insurance, or driving convictions. I understand that failure to do so and any false declaration made above may render the insurance cover for the vehicle invalid and I may then be held personally responsible to pay any costs or damages. I also undertake to notify the organisation of any accident that occurs whilst I am responsible for the minibus.

I understand that all information given will be treated in strictest confidence.

Signature of driver _____

Date _____