

CONTACT 88

DRIVER REGISTRATION FORM

Dealing with vulnerable people we are required to carry out certain checks on our volunteers. Please answer the following as fully as possible and return the form to Contact88, Tozer Way, Chichester, West Sussex, PO19 7LG - Telephone : 01243 531988

PERSONAL DETAILS

Full Name: _____

Telephone No.: _____ Mobile No: _____

Email Address: _____ Address: _____

Date of Birth: _____ Postcode: _____

DISCLOSURE: Contact88 reserves the right to carry out a CRB check on its volunteers. Are there any matters that might affect your suitability to work with Vulnerable adults? YES / NO. If YES please provide details:

DRIVING DETAILS

Licence No.: _____ Date Issued: _____

Expiry Date: _____ Group Entitlement: _____

Years Held: _____ Do you have any current licence endorsements? YES/NO

If YES please provide details including year/s: _____

Have you had any driving convictions in the past 5 years? YES/NO If YES please give details:

Are there any prosecutions pending? YES/NO If YES please give details:

Have you ever been refused motor insurance? YES/NO If YES please give details:

Have you been involved as a driver in an accident in the past 5 years? YES/NO. If YES please give details:

Please give details of any additional licences held (eg HGV,PSV) _____

GENERAL HEALTH:

Do you have, or have you ever had a medical condition that is notifiable to the DVLA that has or could affect your ability to drive? YES/NO If YES please provide details:

Do you have any health issues that may affect your ability to assist our elderly or disabled passengers? YES/NO

If YES please provide details: _____

AVAILABILITY

Which organization will you normally be driving for Contact 88 or other _____

Would you be prepared to drive for other groups? YES/NO

Times normally available: Morning [] Afternoon [] Evenings [] Weekends [] (Please tick)

DECLARATION

Please provide the details for two people who have known you for at least two years who can vouch for you and are prepared to act as Referee and willing to be contacted by Contact 88: One should ideally be from your previous employment. I declare that the details given are correct to the best of my knowledge.

Name: _____ Contact number: _____

Name: _____ Contact number: _____

I declare that the details given are correct to the best of my knowledge.

I understand that the roadworthiness, security and safety of the vehicle whilst in my care will be my responsibility.

I understand that it is an offence to knowingly make claims in order to secure insurance cover.

I agree to notify the Operations Manager of any change in circumstances which may affect my ability to drive a minibus. I understand that failure to do so, or to make any false declaration, may render the insurance cover for the vehicle invalid and in such circumstances I may be held personally responsible for any costs incurred.

Signature: _____ Date: _____

CONTACT 88

Contact 88 Driver Consent Declaration Form

Summary of its Obligations Regarding Data Protection

Contact 88 recognises its responsibilities under the General Data Protection Regulations 2018 (GDPR) in respect of the data that it maintains on computer and in relevant filing systems. Personal information is held in order to be able to communicate details of outings, dates and times and invite registered Drivers to drive on particular outings; as well as enabling general correspondence and communications. Contact 88 must comply with the data protection principles which are set out in the General Data Protection Regulations 2018. For example: information must be collected and used fairly, stored safely and not disclosed to any other person unlawfully. Contact 88 will only use personal information relevant for the purposes of planning and organising outings. Personal medical information provided by Drivers is only used for admin purposes and is not available to or shared with Outings Co-ordinators. Personal information will never be shared with any other organisations. It is Contact 88's policy to seek the consent of volunteers to hold and process personal data.

As soon as a Driver indicates that he/she no longer wants to be registered with Contact 88 all personal details will be deleted from its computer records and any paper copies will be safely destroyed.

If you do not return this consent form then it will be assumed you no longer wish to be involved and your name will be removed from Contact 88's contact list.

Data Protection Officer

Contact 88 has designated one of its Trustees as its Data Protection Officer. All enquiries regarding the GDPR and the Contact 88's policy should be made via the Office Administrator to this person. Only the information captured from the registration form will be kept but if you want confirmation of what personal details are held by Contact 88 then please feel free to contact the Data Protection Officer.

I confirm that I have read the above summary of Contact 88's Data Protection policy and consent to Contact 88 holding my personal data for the specified uses.

Signed.....

FULL NAME IN BLOCK CAPITALS:

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Dated

FOR OFFICE USE ONLY

Licences checked by: _____ Date: _____

Introductory Drive by: _____ Date _____

Vehicle Briefing by _____ Date _____

Wheel chair securing and handling, passenger and safety procedure brief carried out by:

_____ Date: _____

Driving Permit No: _____ Date: _____

EXPIRY Date (3 years) _____ AGE LIMIT REACHED : _____

CRB check YES/NO

CRB Certificate No: _____ Dated: _____

REFEREE checked by: _____ Date: _____

1 First outing accompanied by: _____ Date: _____

2 Second outing accompanied by (where appropriate): _____

Date: _____

3 Approved or solo outings: _____ Date: _____

Drivers Guide & H&S documents issued _____ Date _____

[Elements 1 and 2 may be undertaken by the Operations Manager, Vehicle Manager or other suitably qualified driver assigned by the above Managers. Element 3 can only be approved by the Operations Manager or Vehicle Manager].