

Volunteer Driver Application Form



Position applied for – please tick

Volunteer Car Driver

Name: _____

Address: _____

_____ Postcode _____

Phone: _____ Mobile number: _____

Do you have a current UK/EEC Full Drivers Licence? Yes ___ No ___

Do you have access to a car Yes ___ No ___

Date of Birth: _____

Occupation

Employed <input type="checkbox"/>	Retired <input type="checkbox"/>	Student <input type="checkbox"/>
Unemployed <input type="checkbox"/>	Other please specify <input type="checkbox"/>	

If employed please give details	Duties
Name and Address of Employer	
Job Title:	
Dates commenced employment :	

Previous Employment (most recent first)	Duties
Name and Address of Employer	
Job Title:	
Dates Employed: From: _____ To: _____	

If unemployed when did you last work? _____

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Please outline details of any previous volunteer work:

What do you hope to gain from doing volunteer work?

Hobbies, Interests, Special Skills

What times/days would suit you to work?

Do you have disability/health problems?
If yes please give details along with Doctor's name and address

You are applying to volunteer for the following activities, which are exempt under the Rehabilitation of Offenders Act 1974.
This means that you must tell us about ALL convictions and cautions - even from a long time ago including driving related incidents.
If you are successful, you will be asked to fill in a form giving details of ALL convictions and cautions before you start work.

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Have you ever been involved in criminal proceedings or received any convictions?
Yes ____ No ____

If yes, please detail

References

Please give details of two persons, not related to you, who will provide character references.

Name
Address
Phone Number
How is the referee known to you?

Name
Address
Phone Number
How is the referee known to you?

To be the best of my knowledge the information that I have provided on this form is correct. I understand that deliberate misinterpretation or omission of factual information may disqualify me from consideration or lead to dismissal.

All volunteers and staff must undergo an Access N. Ireland check. Your signature will be taken as agreement for this to be carried out.

Signed _____

Date _____