Driver Information Form

## Purpose

This form is to be used to collect relevant information about people and vehicles transporting participants on behalf of the church, after approval by the church Elders or their delegate, to and from specific activities or programs. Before any person can provide transport for children, an appropriate screening process must be undertaken and documented. Note: If you hold a driver’s licence from a state other than Queensland, please attach details on an additional sheet.

## Driver information

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| Driver’s full name: Preferred name: |
| Driver’s licence number: Expiry date: |
| Number of year’s driving experience: |
| Driver history (please note infringements, accidents and insurance claims incurred in the last 5 years): |
| Driver’s licence type: L P P1 P2 O |
| Driver’s licence condition code: A B M S V X1 X2 |
| Drivers licence class code: RE R C LR MR HR HC MC |
| ☐ I confirm this information to be true and complete  ☐ I will drive carefully and follow all road rules (including that all passengers are correctly restrained)  ☐ I will not drive with alcohol or illicit/illegal drugs in my system  ☐ I will not permit smoking or vaping within the vehicle  ☐ I agree to complete/have completed additional screening requirements before I am approved to transport children  ☐ I agree to adhere to the requirements of the Safe Church Policy and Safe Ministry Check training in my interactions with children  ☐ I will advise of any changes to the information I have provided herein |
| Applicant’s signature: |
| Name: Date: |

## Vehicle information

*Note: Ticking responses marked with an asterisk\* will exclude your application*

**Complete this section if you propose to drive a vehicle other than a church owned vehicle.**

|  |  |
| --- | --- |
| Vehicle registration number: Make and model: | |
| Type of insurance cover: | ☐ Nil\*  ☐ Comprehensive  ☐ Third Party Property  ☐ Third Party Property Fire and Theft |
| Is your vehicle maintained in a roadworthy condition? Yes No | |
| ☐ I confirm this information to be true and complete and give permission for my vehicle to be used for transporting people to and from church activities  ☐ I understand that neither the church or the Churches of Christ in Queensland insurance programs provide cover for any loss or damage to a volunteer’s vehicle, or any loss or damage arising from the use of a volunteer’s vehicle | |
| Car owner’s signature: | |
| Name: Date: | |