

BEVERLEY COMMUNITY

Lift



Dependent on Volunteer Drivers

12 Well Lane
Beverley
East Yorkshire
HU17 9BL

Tel: (01482) 868082
Fax: (01482) 861440
manager@bclift.org.uk

Volunteer Application Form

<u>Personal details</u>
Name
Address
Post code
Telephone No.
Mobile No.
Date of Birth
E Mail address
Car Registration
<i>How did you hear about Beverley Community Lift?</i>
<i>Please state your work/voluntary experience</i>
<i>Are you used to dealing with elderly or disabled people?</i>
<i>Hobbies?</i>
<i>Do you have any commitments that would restrict your availability?</i>
<i>Are you interested in Car or Minibus driving or volunteering in the office?</i>
<i>Health</i> <i>Have you ever had any serious illness, which might affect your driving?</i> If Yes _____
Are you able to lift a wheelchair Yes/No
Are you able to offer a "strong arm" to passengers? Yes/No

Promoting Community and Individual Independence

Reg. Charity No: 506813

Driving How long have you been driving?
Do you have a clean licence? If not how many points do you have?
Would you rather do regular or occasional driving?
What type of car do you have? How many doors? Are you happy to carry a frame or wheelchair?
Have you ever been convicted of a criminal offence? Or do you have any conviction pending?
Are you willing to be CRB checked?
Is there anything else you feel we should be aware of?

Referees	
Name	Name
Address	Address
Postcode	Postcode

Volunteers signature	Date
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PLEASE BRING TO THE OFFICE YOUR DRIVING LICENCE, INSURANCE, MOT and a PASSPORT SIZED PHOTOGRAPH FOR YOUR I.D.BADGE.

THANK YOU FOR VOLUNTEERING.