**Approved Driver Application Form**

(for operating University Owned/Leased/Long Term Hired Vehicles)

**To be completed by the driver: -**

|  |  |
| --- | --- |
| Full Name (in block capitals) |  |
| Post (job title) |  |
| School/Service |  |
| Date of Birth |  |
| Driving Licence Details: |  |
| Driver number |  |
| Vehicle categories |  |
| Valid until |  |
| Date of test pass |  |
| Disqualification periods or Endorsements  You are legally obliged to inform your line manager of any new disqualifications or endorsements |  |

**Declaration from driver** *– I will comply with the University Policy and Procedures, current road traffic and health and safety legislation. I will inform my employer of any legal or medical condition, which may affect me in complying with all relevant legislation and University Policies.*

**Signed: - ………………………………………………. Date: -………...…………**

**To be completed by Occupational Nurse: -**

**Cars and Vans only**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has undergone a medical and is fit to operate University Cars and Vans: - **Yes / No**

**Minibus driving only**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has undergone a medical (in compliance with DVLA Guidelines) and is authorised to drive University Minibuses (Max 16 Seats) on a successful application to the DVLA.

**Medical completed Occupational Nurse…………………………………... Date………………**

**Authorisation from Line Manager…………………………………………... Date………………**

**Authorisation from Head of School/Service……………………………… Date………………**