

Glasgow Coach Drivers Driver Application Form

PAGE 1 - PERSONAL DETAILS

PAGE 1 - PERSONAL DETAILS		
Title:	First name:	Last name:
Sex M/F:	Nationality:	Date of Birth:
CONTACT DETAILS	NEXT OF KIN (EMERGENCY CONTACT)	
Address:	Name:	
	Phone:	

Glasgow Coach Drivers Driver Application Form

BANK DETAILS	
Postcode:	Bank/Branch:
Mobile <small>required</small>	Account No.:
Email: <small>required</small>	Sort code:
Home phone:	Account name:
OTHER INFORMATION	

Glasgow Coach Drivers Driver Application Form

Driver Number (on your driving licence):	Licence expires:
	Car owner Y/N:
EMPLOYMENT	
Would this be your main job? Y/N	If no, who is your main employer?
Can you provide a P45? Y/N	
If not, please complete the attached P46	If no, what is your main job?

Glasgow Coach Drivers Driver Application Form

To comply with HMRC guidelines, it is not our policy to use Self-Employed Drivers unless they are already registered with a Driving Agency. If you are already an "Agency Driver" please get your agency to contact us.

DECLARATION

I declare that the information given is to the best of my knowledge and believe it to be a true and accurate statement. Glasgow Coach Drivers warrants that its personnel will comply with any random alcohol and drug testing that may be conducted by either Just Coach Drivers or its clients, and any personnel who fail such tests will be removed from assignment with immediate effect.

You the Driver will not solicit or accept orders for services from any Glasgow Coach Drivers client whilst working for them AND six months after a period of termination without the prior written agreement from Glasgow Coach Drivers.

Signed:

Date:

Print name (CAPITALS):

Please sign all pages of this Application Form



Glasgow Coach Drivers Driver Application Form

PAGE 2 - MEDICAL DETAILS

Do you smoke? Y/N:

Sick days in last 5 years:

Do you have any physical disabilities that could affect this application? If yes please give details:

BACK PROBLEMS

Have you ever suffered any back issues such as:
Slipped disc Y/N
Sciatica Y/N
Spinal injury Y/N

Any other back injuries:

Glasgow Coach Drivers Driver Application Form

	Medication taken:
EYESIGHT	
<p>Do you require glasses or contact lenses for driving? Y/N: <i>If yes, you may be required to give us a copy of an eye test annually while employed with us.</i></p>	
GENERAL HEALTH	
Please inform us of any other health issues or medication that hasn't already been explained above:	

Glasgow Coach Drivers Driver Application Form

DECLARATION

I declare that the information given is to the best of my knowledge and believe it to be a true and accurate statement. Glasgow Coach Drivers warrants that its personnel will comply with any random alcohol and drug testing that may be conducted by either Glasgow Coach Drivers or its clients, and any personnel who fail such tests will be removed from assignment with immediate effect.
You the Driver will not solicit or accept orders for services from any Glasgow Coach Drivers client whilst working for them AND six months after a period of termination without the prior written agreement from |Glasgow Coach Drivers.

Signed:

Date:

Print name (CAPITALS):

Please sign all pages of this Application Form



Glasgow Coach Drivers Driver Application Form

PAGE 3 - CONVICTIONS

Please give details of any motoring or criminal offences for which you have been convicted, fined, imprisoned, conditionally discharged or placed on probation during the last ten years. Alternatively please enclose a CRB Scottish Disclosure. If you do not have a CRB send us an email to crb@Glasgowcoachdrivers.com.

Date	Offence	Description and place of the court	Sentence or order

Glasgow Coach Drivers Driver Application Form

DECLARATION

I declare that the information given is to the best of my knowledge and believe it to be a true and accurate statement. Glasgow Coach Drivers warrants that its personnel will comply with any random alcohol and drug testing that may be conducted by either Glasgow Coach Drivers or its clients, and any personnel who fail such tests will be removed from assignment with immediate effect. You the Driver will not solicit or accept orders for services from any Glasgow Coach Drivers client whilst working for them AND six months after a period of termination without the prior written agreement from Glasgow Coach Drivers.

Signed:

Date:

Print name (CAPITALS):

Glasgow Coach Drivers Driver Application Form

Please sign all pages of this Application Form



PAGE 4 - ADDITIONAL INFORMATION

Please use the space below for any additional information about you which you feel will assist us in considering your application:

Glasgow Coach Drivers Driver Application Form

REFERENCES

Please give names, address, telephone and email address of 2 references. At least one reference should be your current or ex-employer.

1.

2.

Glasgow Coach Drivers Driver Application Form

PLEASE SUBMIT PHOTOCOPIES OF THE FOLLOWING ITEMS WITH YOUR APPLICATION

Driving Licence (both parts)
Digital Tachograph
Passport
Driver CPC certificates or DQC card

Completed D796 form from our website
Enhanced CRB or Scottish Disclosure
Evidence of any other driving qualifications
***** Plus 2 passport-sized photographs*

DECLARATION

Glasgow Coach Drivers Driver Application Form

I declare that the information given is to the best of my knowledge and believe it to be a true and accurate statement. Glasgow Coach Drivers warrants that its personnel will comply with any random alcohol and drug testing that may be conducted by either Glasgow Coach Drivers or its clients, and any personnel who fail such tests will be removed from assignment with immediate effect.

You the Driver will not solicit or accept orders for services from any Glasgow Coach Drivers client whilst working for them AND six months after a period of termination without the prior written agreement from Glasgow Coach Drivers.

Signed:

Date:

Print name (CAPITALS):

Glasgow Coach Drivers Driver Application Form

Please sign all pages of this Application Form

Once completed please submit along with all relevant documents to our offices:

UK HEAD OFFICE:



Tel 07077070495 email info@glasgowcoachdrivers.com
Glasgow Coach Drivers Limited

114 Lunderston Drive,
Glasgow, G53 6BS

Section one To be completed by the employee

Your employer will need this information if you don't have a form P45 from your previous employer. Your employer may ask you to complete this form or provide the same information in another format. If you later receive your P45, hand it to your present employer. Use capital letters when completing this form.

Your details

National Insurance number

This is very important in getting your tax and benefits right

Title - enter MR, MRS, MISS, MS or other title

Surname

First name(s)

Gender. Enter 'X' in the appropriate box

Male Female

Date of birth DD MM YYYY

Address

House or flat number

Rest of address including house name or flat name

Postcode

Your present circumstances

Read all the following statements carefully and enter 'X' in the one box that applies to you.

A - This is my first job since last 6 April and

I have not been receiving taxable Jobseeker's Allowance, Employment and Support Allowance or taxable Incapacity Benefit or a state or occupational pension.

A

OR

B - This is now my only job, but since last 6 April

I have had another job, or have received taxable Jobseeker's Allowance, Employment and Support Allowance or taxable Incapacity Benefit. I do not receive a state or occupational pension.

B

OR

C - I have another job or receive a state or occupational pension.

C

Student Loans (advanced in the UK)

If you left a course of UK Higher Education before last 6 April and received your first UK Student Loan instalment on or after 1 September 1998 and you have not fully repaid your Student Loan, enter 'X' in box D. (Do not enter 'X' in box D if you are repaying your UK Student Loan by agreement with the UK Student Loans Company to make monthly payments through your bank or building society account.)

D

Signature and date

I confirm that this information is correct

Signature

Date DD MM YYYY