

Bella Vista Courtesy Van

1801 Forest Hills Blvd Suite #120
Bella Vista, AR 72715
479.855.7663

New applicant
 Returning Driver

DRIVER APPLICATION and ANNUAL REGISTRATION

Date: ____/____/____ Applicant full name: _____

Name to appear on van placard: _____

Complete home address: _____

Telephone number: ____ - ____ - ____ Email: _____

Driver's license No: _____ State: ____ Date of birth: ____/____/____

Last 5 digits of Soc Sec: xxx-x____ - ____ - ____ - ____ - ____

Pre-retirement occupation: _____

Emergency Contact: _____ Relationship: _____ Phone: _____

1. Have you ever been convicted of a crime? Yes ____ No ____

2. Have you been ticketed for a moving violation in the last 3 years? Yes ____ No ____

3. If Yes for either 1 or 2 above, please explain and include nature of conviction and/or violation, dates, and location, as applicable:

4. Are you physically able and willing to help riders in and out of the BVCV vans at their residences and appointment locations, including wheelchair users? Yes ____ No ____

5. Are you comfortable being responsible for riders in your van? Yes ____ No ____

6. Are you able to follow verbal directions, read maps, follow GPS? Yes ____ No ____

7. Do you consider yourself to be a good, safe driver? Yes ____ No ____

Note: Driver records may be obtained by the BVCV insurance carrier or officers of the Board)

8. Driving requires time management due to rider appointments running longer or shorter than schedules. Are you comfortable with changing schedules and routines. Yes ____ No ____

9. I agree to not drive under the influence of alcohol, substances, or medication that can impair driving. When possible, advise the Driver Coordinator 24 hours in advance of any condition preventing driving on a scheduled day so a replacement driver can be obtained. Long-term situations impacting driving are to be discussed with the President of the Bella Vista Courtesy Van.

Applicant Signature: _____

+++++NEW APPLICANT ONLY +++++

10. How did you hear about the Courtesy Van? Facebook ____ Newspaper ____ Van ____ Friend ____
Other _____

Date training completed: ____/____/____

Trainer signature: _____