

Trainer Application Form

On behalf of Fleet Source, we would like to thank you for your expression of interest in working with us. To help us match your experience with the courses we provide complete this application with as much detail as possible. Once completed please print off the application form off and sign it, then scan the completed documents and return to Fleet Source - via email.

Full Name						
Address						
Telephone Number	Home				Mobile	
Email						

Fleet Source is a national training company, what is the distance you are prepared to travel.												
Days prepared to work Yes or No	Mon		Tues		Wed		Thurs		Fri		Sat	Sun
	Bank Holidays		Evenings			Nights			Early Mornings			

Sole Trader	YES		NO		
Limited Company	YES		NO		Company Registration No.

Public Liability No.		Copy attached?	YES		NO	
Professional Indemnity No.		Copy attached?	YES		NO	

Driving Licence No.		Copy attached?	YES		NO	
Categories	B	B+E	C1	C	C+E	
Penalty Points	How many?			What Code?		

Please provide DVLA Driving Licence Check Code						
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Valid Driver CPC Card (DQC)	YES		NO		Copy attached?	YES		NO	
ADI	YES		NO		Badge No				
Fleet ADI	YES		NO		Badge No				
Current Standards Grade					C.V Attached	YES		NO	
Any other Driving Instructor qualification?									

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	YES	NO				YES	NO
RoSPA Test			Grade		Copy attached?		
IAM Test					Copy attached?		
Any other Advanced Driving Courses?							
					Copy attached?		
					Copy attached?		
					Copy attached?		
					Copy attached?		

Audit Qualifications	YES	No		YES	No
Do you hold a Transport Manager Qualification?			Copy attached?		
Do you have any auditing experience?			Copy attached?		
Do you hold or are working towards an auditing qualification?			Copy attached?		
If you answered no to question 3, would you be willing to undertake supported training to gain an auditing qualification? (Further details to follow)			Copy attached?		

	YES	NO		YES	NO
PTLLS Level 3			Copy attached?		
AET Level 3			Copy attached?		
CTTLS Level 3			Copy attached?		
DTTLS Level 3			Copy attached?		
Any other teaching qualification?					
			Copy attached?		
			Copy attached?		
			Copy attached?		
			Copy attached?		
			Copy attached?		

	YES	NO		YES	NO
National Register of DCPC Instructors (NRI)			Copy attached?		
Voluntary Register of DCPC Trainers (VTR)			Copy attached?		
National Register of LGV Instructors (NRI)			Copy attached?		
National Vocational Driving Instructors Register (NVDIR)			Copy attached?		

	YES	NO		YES	NO
Certificate of Professional Competence in National Passenger Transport Operations			Copy attached?		
Certificate of Professional Competence in International Passenger Transport Operations			Copy attached?		
Certificate of Professional Competence in National Road Haulage Operations			Copy attached?		
Certificate of Professional Competence in International Road Haulage Operations			Copy attached?		

	YES	NO		YES	NO
Completed a safe Urban Driving Course or Equivalent			Copy attached?		
Completed Safe Urban Driving Train the Trainer Course			Copy attached?		
Have knowledge of the National Standard for Cycle Training			Copy attached?		
Knowledge of CLOCS			Copy attached?		
Knowledge of FORS			Copy attached?		
Knowledge of Mission Zero					

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Please give a summary of any additional qualifications you have achieved and what training you have undertaken – continue another sheet if necessary.

Name of Qualification of Training	Awarding Organisation	Date Achieved

Please give a summary of the types of Drivers CPC training you have delivered and what companies you have delivered on behalf of – continue another sheet if necessary.

DCPC Subject	Company	From	To

As part of the DVSA requirements, trainers will be nominated to deliver specific courses as part of the course approval process.

Please can you provide a summary covering your training skills, subject knowledge, and industry experience.

Please can you explain why you applied to work with Fleet Source and what are your expectations.

I declare that to the best of my knowledge and belief the information provided in this application is true and accurate.

Signature	
Date	

Please email the completed application form to training.department@fleetsource.co.uk with the subject line of Trainer Application and your name

INTERNAL USE ONLY

Date Application Received	
Received by	