

**ESCORTS AND DRIVERS
AUTHORISED IDENTIFICATION BADGE SCHEME**



**WOKINGHAM
BOROUGH COUNCIL**

You must not work on Wokingham Borough Council School and Adult Social Care Services transport contracts without a current valid identification badge. No exceptions will be made for individuals in the process of applying or reapplying for an identification badge.

NEW APPLICATION FOR AN AUTHORISED IDENTIFICATION BADGE

Tick one box			
Passenger Assistant Badge		Drivers Badge	

SECTION 1 – APPLICANT - To be completed by the individual applying for the badge.

Surname:	Previous surname:
First name:	Date of Birth:
Address:	
Postcode:	
Are you an EU citizen? If no, enclose proof that you are entitled to remain and work in the Country.	Yes / No

1. PREVIOUS EXPERIENCE		
1.1 Have you been employed as School or Adult Social Care Services Escort / Driver in the past? If Yes, give details of previous employer below:		Yes / No
Name of Previous Employer	Please briefly outline your main duties and responsibilities	Dates and Length of service
1.2. Have you ever been refused an identification badge or had a badge suspended or withdrawn? If Yes, detail the reasons below:		Yes / No
Date	Authority / Organisation involved	Reasons

2. TRAINING

2.1. What training have you completed to fulfil the role of a School or Adult Social Care Services Escort / Driver?

Tick to indicate the training you have completed and enclose copies of certificates received following the completion of such training.

	Training Course	Date Completed
	Passenger Assistant Training Scheme (PATS)	
	Autism Awareness Training	
	Epilepsy Awareness/ Buccal Training	
	Minibus Driver Awareness Scheme (MiDAS)	
	First Aid	
	Other Training – please specify	

3. CRIMINAL CONVICTIONS OR CAUTIONS

Applicants are reminded that as a result of The Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) (England and Wales) Order 2003, they must declare any convictions which are deemed to be “spent” under the Rehabilitation of Offenders Act 1974.

3.1 Have you ever been convicted or cautioned of any Offence?
If YES, details of all convictions or cautions must be shown below:

Yes / No

Date	Offence charge	Sentence Imposed

3.2 Have you outstanding offences yet to be dealt with by a court?

If Yes, give full details below:

Yes / No

Date	Nature of offence(s)

4. DECLARATION BY THE APPLICANT

Tick to confirm	
	I HEREBY CERTIFY that all statements made in this application are true and correct.
	I confirm that I have received, read, understood and will comply Authorised Identification Badge Scheme for Escorts Assistants and Drivers Guidance Notes.
	I confirm that I have received, read, understood and will comply with the Escorts & Drivers Safeguarding Guidance Notes.
	I confirm that I am physically fit and able to fulfil the manual/physical demands of being a Escort / Driver.

Signature of Applicant	Date

SECTION 2 – TRANSPORT OPERATOR – To be completed by the supporting Operator.

Operators Name	Address
Operators License No	
Issuing Authority	

1. PREVIOUS EXPERIENCE

1.1 What have you done to verify the Applicants previous experience, if applicable, in the role of Escort / Driver with their previous employers e.g. obtained written references?

1.2 If the Applicant has no previous experience in the role of Escort / Driver, what training and support will you provide to the Applicant?

2. TRAINING

2.1 Tick one of the boxes below which is applicable to the Applicant.

<input checked="" type="checkbox"/>		Holds PATS training Certificate?	Training must be completed within:
	Applicant WITHOUT previous experience of a School and Adult Social Care Services Transport Escort / Drivers	No	Attend a PATS training scheme (or equivalent) within 3 months of this application.
	Applicant WITH previous experience of a School and Adult Social Care Services Transport Escort / Drivers	No	Attend a PATS training scheme (or equivalent) within 12 months of this application.
	Applicant WITH previous experience of a School and Adult Social Care Services Transport Escort / Drivers	Yes	Attend a PATS training scheme (or equivalent) no less than 3 years following the previous date when training was received.

2.2 Do you agree to provide the Applicant with the required PATS training within the timeframes as set out under the Wokingham Borough Council School and Adult Social Care Services Transport Authorised Identification Badge Scheme for Passenger Assistants and Drivers policy?

Yes / No

3. DECLARATION BY THE OPERATOR	
Tick to confirm	
	I HEREBY CERTIFY that all statements made in this application are true and correct.
	I confirm that I have received, read, understood and will comply with the Authorised Identification Badge Scheme for Escorts and Drivers Guidance Notes
	I confirm that I support this application and consider the Applicant to be a fit and proper person to be granted an Authorised Identification Badge.
	I confirm that I consider the Applicant to be physically fit and able to fulfil the manual/physical demands of being a Escort / Driver.

Signature of Operator		
Print name		Date:

SECTION 3 – APPLICATION FEES

This application must be submitted with the correct fee. <i>Cheques made payable to Wokingham Borough Council.</i>		
	Fee	✓ Enclosed
Enhanced CRB disclosure check and identification badge	£59.00	
Identification badge only (the applicants Enhanced CRB disclosure check is attached)	£15.00	

Document Check List

Please ensure the necessary documents are attached to this application. Failure to do so will delay the assessment of the application.

	✓ Enclosed
2 x Passport sized photographs – Applicants name and Operators name written on the back.	
Prove of identification – copy of photographic driving licence or national identification card	
New Enhanced Criminal Records Check (CRB) Application Form or Current Enhanced CRB Record Sheet	
Training Certificate(s)	
Copy of Drivers Licence – (for Drivers Badge)	
Cheque for correct application fee	

Please submit this application form to:

Contracts Officer
 Corporate Transport Unit
 Wokingham Borough Council
 Shute End
 Wokingham
 RG40 1BN