**DRIVERS QUESTIONNAIRE**

|  |  |  |
| --- | --- | --- |
| 1 | Name |  |
| 2 | Date of Birth (dd/mm/yy) |  |
| 3 | Occupation |  |
| 4 | School/Service |  |
| 5 | Year of passing driving test |  |
| 6 | Have you driven regularly in the past 12 months? |  |
| 7 | Details of any accidents in the past 3 years including circumstances and approx. cost (if none, state None) |  |
| 8 | Full details of any motoring convictions or pending prosecutions and details of fines imposed (if drink/drive conviction – state milligram reading) during the past 5 years |  |
| 9 | Do you suffer from any physical ailment or infirmity? If “Yes” provide full details |  |
| 10 | Have you been refused insurance on normal terms? If “Yes”, state reasons |  |
| 11 | How many points do you have on your licence? |  |
| 12 | Do you have ‘Business Use’ specified on your own insurance? If you do, then (and only then) you can use your own car on University business |  |
| **Only complete Q13-18 if you answered “Yes” to Question 12 and are likely to use your own car** | | |
| 13 | Make |  |
| 14 | Model |  |
| 15 | Year of manufacture |  |
| 16 | Registration Number |  |
| 17 | Colour |  |

|  |  |  |
| --- | --- | --- |
| 18 | Declaration Date (dd/mm/yy) |  |
| 19 | Signature or Printed Name |  |

Copy Documents to be provided by all:

**Driving Licence – paper copy – (front only) and photocard (front and back)**

Copy documents to be provided if you use your own car on University business (if you answered “Yes” to question 12)

**Insurance Certificate  
MOT Certificate (if car is over 3 years old)**

**Please send hard copies to your School/Service administrator**