

| Drivers Employment Pre-Screen | Date | Drivers Name |
|-------------------------------|------|--------------|

Yes No State Comments

| What Licence do you hold?  |       | HGV1, HGV2, Van<br>driver, car  |  |
|--|-------|---|--|
| Driver over 23yrs Old  |       | Confirm Age of Candidate explaining it is for Drivers Negligence cover                  |  |
| Licence Held for over 2yrs   |       | Client specific - some<br>may accept new<br>drivers under 2 years<br>experience         |  |
| 180 Days in the Last 2 years Exp   |       |   |  |
| Do you hold a valid RTW<br>document - Indate passport/ID<br>card/Visa/UK Birth Certificate |       | Origionals to be bought to registration else will not be                                |  |
| Do you have any live points on your licence - how many                                     |       |   |  |
| Tell me about your Driving<br>Experience   |       | Trunking/Long or short drive routes   |  |
| Pay Status Confirmed   |       | Umbrella/Self Bill/<br>PAYE   |  |
| Documents to bring to Register   |       | Confirm Paperwork to<br>bring according to<br>Pay status they have<br>confirmed         |  |
| Are you fully Flexible to work - including night outs                                      |       | Do they have any restrictions we need to know about                                     |  |
| Licences   |       | CPC DATE TACO DATE LICENCE DATE - all valid over 6 months                               |  |
| Proof of Address within 3 mths   |       | NINO Letter/Utility Bill/Bank Statement/Rental  |  |
| Proof of Bank Account  |       | Bank Statement  |  |
| LTD Documentation  |       | Company House<br>Registration certificate   |  |
| DVLA Check code advised  |       | Do they know how to<br>get the code - if not<br>provide guide by<br>email               |  |
| English Language level Acceptable  | е     | from the telephone<br>conversation - was the<br>communication at an<br>acceptable level |  |
|  |       |   |  |
|  |       |   |  |
| Notes:   |       |   |  |
|  |       |   |  |
|  |       |   |  |
|  |       |   |  |
|  |       |   |  |
| Consultants Name   |       |   |  |
| Consultants Signature  |       |   |  |
| Applicant invited to Register  | Yes N | 10  |  |
| Date and Time Booked to Register   | ·     |   |  |