



Volunteer Driver Application

PH# : 417-283-7991 / 112 West 4th Appleton City, MO 64724

Driver Information						
Name:						
Date of birth: / /	SSN: - -	Driver's License ID#		DL Expiration: ___/___/___		
Mailing address:						
City:	State:	ZIP Code:				
Home Phone:		Cell Phone:	<input type="checkbox"/> Android <input type="checkbox"/> Apple			
Physical address (if different):						
City:	State:	ZIP Code:				
Traffic Violations in the Last 3 Years? (attach a copy of a valid driver's license)						
<input type="checkbox"/> No		<input type="checkbox"/> Yes (please explain)				
Convicted of Misdemeanor(s), Felony(s), or other Crimes?						
<input type="checkbox"/> No		<input type="checkbox"/> Yes				
Date:		Violation:				
Availability						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Restrictions?						
Are you able to help others in & out of vehicles?			<input type="checkbox"/> No	<input type="checkbox"/> Yes		
Are you able to help with wheelchairs & walkers?			<input type="checkbox"/> No	<input type="checkbox"/> Yes		
Are you able to help others in & out of buildings?			<input type="checkbox"/> No	<input type="checkbox"/> Yes		
Vehicle Information						
Attach copies of vehicle registration and current insurance card for each vehicle used for volunteering.						
Vehicle 1	Make/Model	Year 20_____	Insurance Expiration	Registration Expiration	Plate #	
Vehicle 2	Make/Model	Year 20_____	Insurance Expiration	Registration Expiration	Plate #	
<p>Please read the following statement. I acknowledge I will be reimbursed for distance traveled from my home and back to my home while driving <i>scheduled</i> clients for the VTC. My automobile insurance will remain in effect; VTC's insurance coverage is secondary liability only. All requests for transportation will be screened and approved through the VTC. A Transportation Coordinator will contact you for specific dates and times. If accepted, you agree to abide by VTC guidelines, including completion of required vouchers indicating client and the miles driven. Vouchers will be provided by the VTC. The vouchers should be completed at the end of each run and turned in weekly to the VTC (due each Thursday by 4pm). You may hand deliver, mail, fax or email vouchers in pdf or jpg format.</p> <p>Please note the Volunteer Transportation Center does not discriminate. The eligibility of each driver is not based on age, race, color, or religious beliefs. Eligibility is based on the information provided by you as well as the references.</p>						
Signature of applicant:				Date:		

ACCUDATA CREDIT SYSTEMS LLC

Disclosure and Authorization Form for Employment

Applicant's FULL LEGAL Name _____

All Former Names & Dates Used / AKA's & Dates Used _____

Day Phone(_____)_____ - _____ Home &/or Cell Phone(_____)_____ - _____;(_____)_____ - _____

Current Address _____

City _____ State/Zip _____

Social Security Number _____ - _____ - _____ Driver's License #/State _____

Date of Birth MM _____ /DD _____ /YYYY _____ Male _____ Female _____

Name while Student or On Diploma _____ Student ID Number _____

Complete For International Verifications:

Canada: Residential Address: _____

Insurance Number _____ - _____ - _____ Province: _____

Name while Student or On Diploma _____ Student ID Number _____

International Employer Assigned Employee Identification Number: _____

International Government Identification Number: _____ Country: _____

International Criminal Search Both Parents Full names: _____

As part of the application process for employment at _____, I understand that Accudata Credit Systems LLC will seek and obtain consumer reports / investigative reports about me as defined in the Fair Credit Reporting Act (FCRA). You, Accudata Credit Systems LLC, are hereby authorized to make any investigation of my personal/character history, all academic/professional records, degrees/attendance/transcripts/credentials/certifications/licenses, military service records, current and past employer(s) names, hiring & termination dates, work experience/attendance/habits/performance, character and general reputation, workers compensation claims, criminal history records (from local, state, federal, international and other law enforcement agencies records), sexual offender's lists, wants & warrants records, motor vehicle records, financial (such as assets, bank, credit card, or personal lending), credit history records, credit worthiness, public records, civil case, OIG/GSA, OFAC/Patriot Act, any sanctions lists, FBI finger printing and drug screen results. I hereby authorize, without any reservation, the full release of these records and information for Accudata Credit Systems LLC and/or its agents or any investigative or credit/consumer reporting agencies or bureaus of their choice, to conduct the searches and investigations.*

I hereby certify that the facts set forth in the completed employment application, on this form, and on my resume are true and complete to the best of my knowledge. If I am hired, I also authorize the full release of the information described above, with out any reservation, throughout the duration of my employment. I understand that if employed, falsified statements on this form, employment application or my resume will be considered just cause in the termination of employment at any time. I agree that a copy or facsimile of this authorization shall be as valid as the original. I release and hold harmless Accudata Credit Systems LLC, any person, agents, firm, or entity that discloses matters in accordance with this authorization, as well as from any expenses, losses, damages, and liabilities that might otherwise result from the request for use of and/or disclosure of any or all of the foregoing information. Upon Request, Accudata Credit Systems LLC will supply a copy of my reports and my rights under the Fair Credit Reporting Act. Direct requests to: Accudata Credit Systems, LLC, 1002 Diamond Ridge Suite 500, Jefferson City MO 65109 or by contacting us at 1-800-475-6703.

Date MM _____ /DD _____ /YYYY _____ Signature _____

**NOTE: Section 604 (b) of the Fair Credit Reporting Act Provides Conditions for Furnishing & Using Consumer Reports for Employment Purposes. The Provisions of the Fair Credit Reporting Act & Driver Privacy Protection Act will be applicable if a either type of report on the applicant is obtained and considered. The EEOC states for the purpose of pre-employment inquires, under the Age Discrimination in Employment Act of 1967, Section 1625.6, "A request on the part of an employer for information such as 'DATE OF BIRTH' OR 'STATE AGE' on an employment application form is not, in itself, a violation of the act.." This application will remain on file for 90 days after which time it may be discarded. Any applicant who wants to remain an applicant after that time period must file a new application.*

Notice to California Applicants:

Under section 1786.22 of the California Civil Code. You may obtain a copy of this file, either in person or via mail, by submitting proper identification and paying the costs of duplication services.

California Resident ONLY: By checking this box, I request to receive a free copy of the ordered report



Please include the follow materials in your volunteer driver application:

Copy of Driver's License-

Copy of Social Security Card-

Vehicle Registration (MO Registration can have two pages)