Claremont Primary School



Mrs Candi Roberts, BA (Hons) NPQH

Banner Farm Road Tunbridge Wells Kent TN2 5EB

Tel: 01892 531395 admin@claremont.kent.sch.uk www.claremont.kent.sch.uk

Dear Parent/Carer

Thank you for offering to use your own vehicle to assist us in transporting pupils from the school to local venues.

In order to fulfil our obligations under Health and Safety law I would be grateful if you could:

- complete and sign the attached form
- provide a copy of your valid insurance policy <u>with business cover</u> for the vehicle in which you intend to transport children
- provide the print out of the Driving Summary to share your driving licence information with us.
 - Please go to <u>View or share your driving licence information GOV.UK (www.gov.uk)</u>
 - o enter your driving licence number, National Insurance Number, postcode.
 - Go to 'Get your check code' tab and click 'Get a code'. Underneath your code will be an
 opportunity to print or save your driving summary.

Please be aware that we are also required to check that the vehicle you intend to transport children in has a valid MOT certificate if it is over three years old.

Yours sincerely

Mrs Candi Roberts

Headteacher

Validation for Voluntary Vehicle Use

For the use of staff, parents and other volunteers' private vehicles

Make and Model of Vehicle	Registration Number
For office use only – Evidence of the following has been obtained:	
A current and valid insurance policy <u>with business cover</u> for the vehicle in which they intend to transport children/young people <i>(copy retained)</i> .	
$\ \square$ The authorisation code shared from GOV.UK's "View or share your driving licence information" service.	
☐ Evidence that the volunteer driver's licence is valid and the driver is suitable, using the GOV.UK's "Check someone's driving licence information".	
☐ Evidence that the vehicle is in roadworthy condition (with Vehicle Tax and a valid MOT), using GOV.UK's "Check the MOT history of a vehicle" service.	
Declarations:	
• I understand that I am not covered under the above establishment's insurance for the use of my vehicle.	
I will drive in accordance with The Highway Code.	
• I will ensure that each young person travels using a recognised seat and will wear a seatbelt at all time.	
Under the terms of the Data Protection Act 1998 we must inform you of the following:	
By signing this form you are giving your consent to Kent County Council to process the information on the form. The processing involved will only be for the purpose of monitoring health and safety in Kent County Council in accordance with relevant legislation. This may involve sharing of information you provide with local regulatory bodies	
Signed:Dat	re:
Print Name (in capitals)	