



first baptist church of Palm Coast

Bringing HOPE to Palm Coast

Driver Application Form

Please print clearly and fill out completely.

SECTION 1. GENERAL INFORMATION

Date of Application: _____

Name: _____
FIRST NAME LAST NAME

Address: _____
NO. & STREET CITY STATE ZIP

Telephone(s): _____
HOME CELL OTHER

E-mail: _____

Age: _____ Date of Birth: _____ Gender: _____

**FBCPC's insurance carrier requires that all vehicle drivers be at least 25 years of age or older.*

Social Security Number (SSN): _____

**All who apply to drive FBCPC owned vehicles are required to submit to a criminal background check. Submitting a driver application form implies authorization for the church to perform a background check.*

Driver's License Number: _____ State: _____

Driver's License Class: _____ DL Expiration Date: _____

If CDL, passenger endorsement? Yes No

**Operation of FBCPC's 25 Passenger Bus requires a CDL license with a passenger endorsement.*

Auto Insurance carrier & policy number: _____

Ministry or ministries of FBCPC are you applying to drive for _____

SECTION 2. DRIVING HISTORY

Have you had any motor vehicle accidents in the last 3 years? Yes No

Have you had any traffic convictions in the last 3 years (other than parking)? Yes No

Have you ever been denied a license or privilege to operate a motor vehicle? __Yes __No

Has any license, permit or privilege ever been suspended or revoked? __Yes __No

Have you ever been convicted of a felony? __Yes __No

If the answers to any questions listed above are "yes", give details.

I, the undersigned, acknowledge that I have read and understood the First Baptist Church of Palm Coast Vehicle Use Policy and I agree to follow the terms and conditions therein.

It is also agreed and understood that, in accordance with the provisions of Section 604(b)(2)(A) of the Fair Credit Reporting Act (FCRA) (Title II, Public Law 104-208), a Background Check will be ordered and used in the course of consideration of my employment or volunteer service. This investigation may include a Consumer Credit Report as part of this investigation.

I, the undersigned, acknowledge the above disclosure and authorize First Baptist Church to obtain any or all of the above referenced reports about me for use in relation to my application/volunteer service.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

Applicant's Signature

Date

For Office Use Only

- Copy of valid Driver's License
- Copy of valid insurance card
- Background check validation
- Fleet Card Code Assigned _____
- Approved Disapproved

Business Manager's Signature