

Year
2013-14
Ref:

SOCIAL TRANSPORT SUPPORT APPLICATION FORM
EXTERNALLY MANAGED BY WEST DUNBARTONSHIRE CVS

1.	Name & Address of Applying Organisation:			
	Principal Contact Person:		Contact Tel No:	
	Contact Email Address:			

2.	Booking Schedule	Period involved (please tick as appropriate): <input type="checkbox"/> Spring (April – June) <input type="checkbox"/> Summer (July – Sept) <input type="checkbox"/> Autumn (Oct – Dec) <input type="checkbox"/> Winter (Jan – Mar) <input type="checkbox"/> Regular Bookings – weekly, fortnightly, monthly
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3.	Booking 1 <i>Venue contact details are required to ensure that we can clarify that the destination lies within the eligible zones for your level of support.</i> <i>Zone 1 – Neighbourhood travel</i> <i>Zone 2 – Within West Dunbartonshire boundary</i> <i>Zone 3 – Outside West Dunbartonshire boundary</i> <i>Self hire drive is permitted if the group can prove that the driver is licensed to drive a vehicle of the size proposed, the driver has passed an approved MIDAS course and appropriate insurance cover is held on the vehicle.</i>	Destination From:			
		Destination To:			
		Purpose of Trip:			
		Booking Contact Name & Contact Tel No:			
		Dates of booking :		Length of Booking: (number of weeks):	
		Type of transport being hired:	<input type="checkbox"/> Taxi/People Carrier Service (private) <input type="checkbox"/> Minibus with driver (private) <input type="checkbox"/> Minibus with driver (community transport scheme) <input type="checkbox"/> Coach/bus operator <input type="checkbox"/> Minibus hire – self drive (see note) <input type="checkbox"/> Other – please specify:		
		Number of members eligible for transport support:			
		Cost quoted by provider: £			
Benefit of provision:	<input type="checkbox"/> Promote independence and self management <input type="checkbox"/> Overcome mobility issues <input type="checkbox"/> Overcome medical issues <input type="checkbox"/> Overcome communications/vulnerability challenges <input type="checkbox"/> Overcome behavioural issues <input type="checkbox"/> Reduce social isolation <input type="checkbox"/> Other – please specify:				

3.	Booking 2 <i>Venue contact details are required to ensure that we can</i>	Destination From:		
		Destination To:		

<p>clarify that the destination lies within the eligible zones for your level of support.</p> <p>Zone 1 – Neighbourhood travel Zone 2 – Within West Dunbartonshire boundary Zone 3 – Outside West Dunbartonshire boundary</p> <p>Self hire drive is permitted if the group can prove that the driver is licensed to drive a vehicle of the size proposed, the driver has passed an approved MIDAS course and appropriate insurance cover is held on the vehicle.</p>	Purpose of Trip:	
	Booking Contact Name & Contact Tel No:	
	Dates of booking :	Length of Booking: (number of weeks):
	Type of transport being hired: <input type="checkbox"/> Taxi/People Carrier Service (private) <input type="checkbox"/> Minibus with driver (private) <input type="checkbox"/> Minibus with driver (community transport scheme) <input type="checkbox"/> Coach/bus operator <input type="checkbox"/> Minibus hire – self drive (see note) <input type="checkbox"/> Other – please specify:	
	Number of members eligible for transport support:	
	Cost quoted by provider: £	
Benefit of provision: <input type="checkbox"/> Promote independence and self management <input type="checkbox"/> Overcome mobility issues <input type="checkbox"/> Overcome medical issues <input type="checkbox"/> Overcome communications/vulnerability challenges <input type="checkbox"/> Overcome behavioural issues <input type="checkbox"/> Reduce social isolation <input type="checkbox"/> Other – please specify:		

4. Additional Information	
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5. Authorisation & Declarations	<p>I confirm that the information on this application is accurate. I agree to complete an end of award evaluation form to assist with the monitoring and evaluation of the process.</p> <p>Signed:</p> <p>Date:</p>
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Data Protection Act

We will use the information you give us on the application form and supporting documents during assessment and for the life of any grant awarded to you. We may give copies of this information to local authority accountants, external evaluators and other organisations or groups involved in delivering the grants scheme. We may also share information with other local authority officers, with a legitimate interest in grants, or for the prevention or detection of fraud. We may use the data you provide for our own research. We recognise the need to maintain the confidentiality of vulnerable groups and their details will not be made public in any way, except as required by law.