

PENQUIS C.A.P., INC.
PO Box 1162, 262 Harlow Street
Bangor, Maine 04402-1162

VOLUNTEER DRIVER APPLICATION FOR THE LYNX

Name _____, _____, _____ SS# _____
Last First MI

Address _____ Telephone _____

_____ Zip Code _____

Date of Birth _____

I. Formal Education/Training: _____

II. Skill/Abilities: _____

III. Previous Occupation and Volunteer Experience: _____

IV. Availability: (When could you start and how many hours per week?) _____

V. How did you find out about this volunteer position? _____

Why do you want to become a volunteer driver? _____

Are you looking for a short term or long term volunteer opportunity? _____

Character References: (2 personal and 2 work/volunteer related)

	Name/Address	Phone Number
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

VI. Are you able to perform the functions of the position for which you are volunteering?

Answer Yes or No to the following

- These include: _____ drive vehicle utilizing safe and defensive driving habits
_____ ability to lift 40 lbs. (assist elderly person or child in and out of vehicle)
_____ be able to respond quickly in an emergency
_____ ability to follow directions and/or read maps to find clients homes/appts.
_____ ability complete routine paperwork consisting of logging client names and addresses, your odometer reading
_____ must have own personal telephone

Explain any "NO" answers (use back of form if necessary): _____

Reasonable accommodation will be made for otherwise qualified persons with disabilities.

VII. Do you wear corrective lenses? _____ Date of last eye exam _____

Describe any current medical conditions you are being treated for - or that require medication:
(List medication associated with each condition)

VIII. Are you currently facing any criminal charges? _____

Have you had any past criminal convictions in a court of law? _____ If yes, explain: _____

Have you been convicted of any moving traffic violation within the past three years? _____

Have you had more than 1 at-fault accident within the previous year? _____ If yes, explain:

IX. Have you ever been convicted of or investigated in relation to any form of child abuse or neglect? _____ If yes, explain: _____

X. Approximately how long have you been licensed to drive in the state of Maine? _____
Drivers License# _____ Have you held a license in another state? _____
If yes, what state? _____ During what years? _____

Can you provide transportation to perform the duties of your assignment? _____

Describe vehicle _____
Year Make Model Airbags Y/N # of passengers

Is it insured? _____ Currently inspected? _____ Currently registered? _____

XI. Share anything else that might be of assistance in evaluating your application:

XII. Assurances:

- a. I understand that the nature of Penquis C.A.P., Inc. services require strict confidentiality standards, and I agree to support and abide by these standards.
- b. I certify that all information provided is complete and correct to the best of my knowledge. I give Penquis C.A.P., Inc. permission to check on this information and to contact references, including DHHS, State Bureau of Identification and the Department of Motor Vehicles as necessary and appropriate.

Signature

Date

Confidentiality Statement

The only information that will be provided to anyone, regarding a volunteer, without specific permission, is the dates of involvement (unless required by law). Before any other information is released, the volunteer must give the Agency written permission. Therefore, volunteers should make sure they have given the Agency such permission before telling anyone to contact us for information.