

|      |  |         |  |     |  |
|------|--|---------|--|-----|--|
| NAME |  | BDS REG |  | ULN |  |
|------|--|---------|--|-----|--|



BRITISH DRIVING SOCIETY

83, NEW ROAD, HELMINGHAM, STOWMARKET, SUFFOLK, IP14 6EA

TEL: 01 473 892 001 e-mail: [bdseducation@aol.com](mailto:bdseducation@aol.com)

**LEARNER REGISTRATION FORM FOR  
BRITISH DRIVING SOCIETY**

**QUALIFICATIONS & CREDITS FRAMEWORK ( QCF) UNITS AND QUALIFICATIONS**

**BDS CODE OF PRACTICE ROAD DRIVING TEST FOR COMMERCIAL OPERATORS OF HORSE  
DRAWN VEHICLES ON THE PUBLIC HIGHWAY  
BDS REF: BDSCRDT/2010**

*This form should be used by candidates who wish to apply for the above Assessment. It must be submitted to the BDS Education Office, at the address above, at least 10 working days before you propose to take the test. The form must be submitted in paper format, and sent to us by post, because we will require your signature for identification purposes when you take exams. Any fees which are payable should be paid by cheque, made out to The British Driving Society, or we can accept payment by credit or debit card. Once we have received and processed your application form, and any fees due, we will appoint an Assessor and notify you of their contact details, so that you can arrange a test date, time and venue direct with them.,.*

**Please write only in the CLEAR boxes. The PINK boxes are explanatory notes for your information, and the BLUE boxes are for Office use only.**

**PLEASE USE CAPITAL LETTERS THROUGHOUT.**

**NOTES FOR INFORMATION:** *We need the following details so we can identify you correctly. You must let us know as soon as possible if any of these details change, so we can update your records. We will need proof of your identity at Assessment, so please ensure your Registration details are the same as the details on your identification documents and/or your Training Provider records.*

|        |                  |                      |       |          |
|--------|------------------|----------------------|-------|----------|
| Box 1. | LAST NAME        |                      |       |          |
| 2.     | FIRST NAME(s)    |                      |       |          |
| 3      | ADDRESS          |                      |       | POSTCODE |
| 4      | CONTACT DETAILS  | TELEPHONE - LANDLINE |       |          |
|        |                  | TELEPHONE - MOBILE   |       |          |
|        |                  | e-mail address       |       |          |
| 5      | DATE OF BIRTH    |                      |       |          |
| 6      | PLACE OF BIRTH   |                      |       |          |
| 7      | SIGNATURE & DATE | SIGNATURE:           | DATE: |          |

***NB: please see page 2, Section 9, which also requires your signature***

|  |              |  |                      |  |
|--|--------------|--|----------------------|--|
| ADDRESS OF PREFERRED TEST VENUE            |              |  |                      |  |
| TYPE OF TEST ( TICK ALL APPROPRIATE BOXES) | SINGLE       |  | URBAN                |  |
|  | PAIR         |  | RURAL                |  |
|  | TEAM OF FOUR |  | URBAN/RURAL COMBINED |  |

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## 8. DIVERSITY AND EQUALITY

We would appreciate some information about yourself, to help us meet the general equality and diversity needs of all Learners, and to ensure everyone is treated fairly during training and assessment. The information is used for statistical purposes, and your personal details and identity will not be disclosed to anyone without your written consent. If there are any details you prefer not to provide, please leave boxes blank; leaving any or all boxes blank will not affect Registration, Training or Assessment procedures in any way. The BDS has a robust Diversity and Equality Policy, and endeavours to ensure that all Learners are treated equally during training and assessment. We investigate complaints relating to unfairness or discrimination, and copies of the BDS Diversity and Equality Policy, together with our complaints procedure and form, are included in your Learner Registration Pack.

### PLEASE TICK BOX, OR WRITE BRIEF DETAILS, OF ANYTHING YOU CONSIDER APPLIES TO YOU

|  |                      |                |                      |                 |                   |
|--|----------------------|----------------|----------------------|-----------------|-------------------|
| <b>GENDER</b>  | <b>MALE</b>          | <b>FEMALE</b>  |                      | <b>OTHER</b>    |                   |
| <b>COUNTRY OF ORIGIN</b><br>(NB: EU Horse Transport legislation requires your country of birth to be stated on WATOs Certificates) | <b>BRITISH</b>       | <b>ENGLISH</b> | <b>IRISH</b>         | <b>SCOTTISH</b> | <b>WELSH</b>      |
|  | <b>OTHER):</b>       |                |                      |                 |                   |
|  | <b>ETHNIC ORIGIN</b> |                |                      |                 |                   |
| <b>RELIGION</b>  |                      |                |                      |                 |                   |
| <b>MARITAL STATUS</b>  | <b>SINGLE</b>        |                | <b>MARRIED</b>       |                 | <b>OTHER</b>      |
| <b>SEXUAL ORIENTATION</b>  |                      |                |                      |                 |                   |
| <b>EMPLOYMENT</b>  | <b>EMPLOYED</b>      |                | <b>SELF-EMPLOYED</b> |                 | <b>UNEMPLOYED</b> |

**PLEASE PROVIDE ANY INFORMATION ABOUT YOURSELF WHICH YOU FEEL MAY AFFECT THE FAIRNESS OF YOUR TRAINING PROVISION, LEARNING OR ASSESSMENT.** (NB: if you have any physical or mental issues for which you wish to apply for Reasonable Adjustments, or to use special equipment or facilities, please contact the BDS Office for an application form).

## 9. UNIQUE LEARNING NUMBER ( ULN) – Fair Processing Notice

In order to process your Credit Accumulation for your Unit and Qualification achievements within the Qualifications & Credits Framework, we need to issue you with a Unique Learning Number ( ULN), which will be held on a secure database, administered by MIAP, the Department of Education's official database. Information about your Qualifications achievements will only be accessible by you, BDS Awards Board, and MIAP unless you authorise us to share it with anyone else ( ie: you may authorise us to officially confirm your qualifications to a potential employer). If you agree to these terms and conditions, please sign the box below.

|                |              |
|----------------|--------------|
| <b>SIGNED:</b> | <b>DATE:</b> |
|----------------|--------------|