

# Application for Drink Drive Rehabilitation Course Approval

Section 1: Course Provider Details		
1.1 Course provider name:		
<b>1.2</b> Correspondence address:		
1.2.1 Website address:		
<b>1.3</b> Name of person responsible for DDF	R:	
<b>1.3.1</b> Position (i.e. owner/director):		
1.3.2 Telephone number:		
1.3.3 Email address:		
<b>1.4</b> Name of primary contact:		
<b>1.4.1</b> Position in organisation:		
1.4.2 Telephone number:		
1.4.3 Email address:		

## Section 2: Registered Details

2.1 Type of organisation – Tick all that apply

Limited Company	Charity
Sole Trader	Local Authority
Partnership	Other (please specify)
LLP (Limited Liability Partnership)	
2.2 If Sole Trader - Proprietor name:	
2.3 If Partnership - Partner names:	
2.4 Name of Registered Company or LLP:	

**Important:** Approval is granted to the legal entity of your organisation and not the person who completes the application form (except in the case of a sole proprietor). There is no provision under the Rehabilitation Courses (Relevant Drink Offences) Regulations 2012 for the transfer of an approval to another person or corporate body.

2.5	Companies House registration
numl	ber or Charity number (if applicable):

**2.6** VAT No. (if applicable):

2.7 Registered address:

**2.8** Name of Parent/Holding Company (if applicable):

any

## Section 3: Geographical Areas

**3.1** Please tick the geographical areas you wish to deliver the DDR course in and provide full details (name and addresses) of the venues you intend to use:

1. Cumbria & Lancashire	12. Kent, Surrey and Sussex
2. Greater Manchester	13. Cambridgeshire, Essex, Norfolk and Suffolk
3. Cheshire & Merseyside	14. Bedfordshire, Hertfordshire & Thames Valley

4. Cleveland, Durham and Northumberland	15. London North and West
5. North and West Yorkshire	16. London South and Central
6. Humber and South Yorkshire	17. South Strathclyde, Dumfries and Galloway
7. Staffordshire and West Mercia	18. Lothian and Borders
8. West Midlands and Warwickshire	19. Glasgow and Strathkelvin
9. East Midlands	20. North Strathclyde
10. South West (West Area)	21 . Tayside, Central and Fife
11. South West (East Area)	22. Grampian, Highland and islands
	23. Wales
Section 4: Course Details	
<b>4.1</b> Has this course been previously approved?	Yes Nc
<b>4.1.1</b> If yes, what was the course number?	DDR

**4.1.2** If no, has any director/shareholder been involved with another approved DDR Course Provider?

No (go to 4.1.4)

**4.1.3** If **Yes** - on a separate sheet of paper please provide further details including the person's name, position and the name of the course provider previously involved with.

# Section 5: Course Delivery

- **5.1** Please provide details of the training programme in the form of a course summary.
- 5.2 Please provide the aims and objectives (i.e. learning outcomes) for this specific

Aim:

Objectives:

**5.4** Please provide details of training skills, subject knowledge and experience for each trainer delivering this course. Evidence should assure DVSA that the trainer is competent and has the knowledge to deliver the subject matter.

5.5 Training Delivery: Classroom	Remote
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All courses are subject to audit and the auditor will verify that the course is being delivered as specified on the approved course summary and inline with legislation. Failure to deliver the course as approved may result in the withdrawal of the course.

### Section 6: Compliance

6.1 DVSA must ensure the quality of approved course on behalf of the Secretary of State.

#### Please provide a Scheme of Control, with this application.

This will need to detail the arrangements in place to explain how your organisation will operate in a professional and consistent manner and will satisfy DVSA that these arrangements are sufficiently robust. Guidance for the Scheme of Control can be found at: www.jaupt.org.uk/media/774392/ddr-scheme-of-control-guidance-140818.pdf

Failure to comply with the Scheme of Control and Application may result in the DDR course being withdrawn.

## Section 7: Compliance

#### 7.1 Confirmatory statements

To further support your application and provide assurance that you will operate in a professional manner, please confirm aspects of your administration/delivery using the format below:

**7.1.1** We confirm that we have adequate controls in place to inform DVSA of any changes of contact details.

**7.1.2** We confirm that we have adequate controls in place to inform DVSA of any changes to our legal status and understand that the approval is granted to the legal entity and cannot be transferred.

**7.1.3** We confirm we will have adequate controls in place to make sure we comply with the requirements of approval at our centre and across every site where training is delivered for the purposes of DDR.

**7.1.4** We confirm, and will give proof when requested, that our premises are suitable and have the required resources for the delivery of training, the storing of training records centrally, and the carrying out of all necessary administration including adequate auditable records for the purposes of DDR.

**7.1.5** We confirm, and will give proof when requested, that we have procedures in place to meet demand in all specified geographical areas, if required for which the course approval covers.

**7.1.6** We will give up-to-date details of where and when we will be running approved training courses within 48 hours of the start of the course including any changes to the dates, times and locations of via www.jaupt.org.uk Cancellations must be informed to DVSA no later than 20 days before the start of the course

**7.1.7** We confirm that we will give details and proof of the qualifications and experience of each of our trainers relating to the DOR course for which we seek approval.

**7.1.8** We confirm that we will manage trainers appropriately to ensure all training courses are delivered in accordance with the approved course summary and are aware that failure to do this may result in the withdrawal of the course.

**7.1.9** We confirm that we will give details and proof of the appropriate learning materials to be used to support the training.

**7.1.10** We confirm, and will give proof when requested, that we have in place suitable controls to accurately record attendance on training courses and can give proof of actual start, finish and break times of each training course that we run for the purposes of DDR.

**7.1.11** We confirm, and will give proof when requested, that a Privacy Notice will be issued to individuals informing them of the purpose for the collection of their personal data and the identity of anyone with whom it can be shared.

**7.1.12** We confirm, and will give proof when requested, that we will issue a Certificate of Completion to the court and the individual no later than 14 days specified in the order as the latest date for completion of the course.

**7.1.13** We confirm, and will give proof when requested, that we will issue confirmation to the court and issue a Notice of Non-Completion to the individual (by post and certified by the carrier) later than 14 days specified in the order as the latest date for completion of the course for individuals who fail to complete the approved DDR course.

**7.1.14** We confirm, and will give proof when requested, of the complaints procedure available to offenders should they have any concerns regarding delivery of the DDR course and/or service provided

**7.1.15** We confirm, and will give proof when requested, that we will abide by the guidelines for use of DDR logo.

**7.1.16** We confirm, we will submit the required performance and financial reporting templates and pay associated fees by the 14th of each quarter.

#### Section 8: Declaration

I declare that the information I have given in support of the application to deliver an approved course is true, complete and accurate.

Name:	
Position:	
Date:	

## Section 9: Payment & Checklist

Payment of the current fee is accepted via the methods below and should be made within five working days of application receipt by DVSA.



9.1

Cheque (Please make cheques payable to DVSA)

Credit/Debit card (A call to the course provider will be made by DVSA to gain this information)

BACS Please use the following bank details for BACS payment:

Bank Name:Nat WestSort Code:60-70-80Account Number:10004440

Please ensure your remittance advice is included.

#### 9.2 Application Checklist



You should submit this form to JAUPT-Enquiries@DVSA.gov.uk or alternatively post it to:

DVSA Cubix, Suite 208 Noble House Capital Drive Linford Wood Milton Keynes MK14 6QP

Any queries should be directed to JAUPT-Enquiries@DVSA.gov.uk or alternatively on 01908 787000.