**Bedale Community Minibus - MiDAS Training Enquiry Form**

**Part A -Individual /Organisation Contact Details:**

1. **Name of the Individual:**

2. **Name of the Organisation:**

 For an organisation, please give the name of the primary contact:

3. **Contact details for Individual or Organisation -** please include phone, email and postal address.

**Part B - What MiDAS Training is required.**

1. **Number of Candidates**

* **Standard Package**: Induction Training

 Refresher Training

* **Accessible Package:** Induction Training

 Refresher Training

2. **Priority.** Is there any urgency to get someone trained, a simple explanation will help to understand the urgency?

**Part C – Training Facilities.**

1. **Classroom**

* Do you have you own classroom? Yes/No
* Does it have IT equipment for powerpoint presentations? Yes/No

2. **Minibus**

* Do you have your own minibus. Yes/No
* Will it be available on the day?
* Is it fully insured and has in date road tax. Yes/No
* Is it suitable for a B Licence holder? Yes/No

**Part D - Registered for MIDAS?**

1. Is your organisation registered with the MIDAS Scheme through the Community Transport Association?

2. As an example; Bedale Minibus Community Minibus’s registration number is M6003