## FORS training application



## I am applying to deliver FORS training

Operator/training provider				
Address				
Telephone				
Email				
FORS associate ID number				
DVSA/JAUPT approved training centre number		AC		
Select the training course you are applying to deliver (select one)		HGV drivers Safe Urban Driving V.02		
			Van Smart	
			Staying Legal LoCITY	
		PCV drivers		
			Destination London	

maining starr register	and competency deci	aracion			
Course title (select on	e):				
Safe Urban Driving	Van Smart Stay	ving Legal LoCITY	Destination Londor		
	Evidence held by er				
Trainer Name	Date	Theory	Practical		
Example	01/01/2018	Copy of driving licence Copy of DQC CV Course certificate	Copy of driving licence NSI certificate Copy training log Course certificate		
1	26	of			
the competencies req	_	hold the relevant evide approved training. All tr			
Sign					
Date					
Training material and application form should be sent by either email or post to:					
Email		Post			

freight@tfl.gov.uk

Training: Freight & Fleet Programmes II G7 Palestra 197 Blackfriars Road London SEI 8NJ