



Rural Links Membership Application Form

- ▶ This form is available, on request, in a range of alternative formats.
- ▶ Please contact us if you require any help completing this form.

Personal Details

Please complete in **BLOCK CAPITALS** and answer all questions.
Please tick the appropriate boxes, where indicated to do so.

TITLE: MR MRS MISS MS OTHER _____

FORENAME:

SURNAME:

ADDRESS:

POST CODE:

DATE OF BIRTH:

TELEPHONE NO:

MOBILE NO:

EMAIL ADDRESS:

Eligible Membership Criteria

Please ensure that **both** of the following apply to you

This section will confirm if you are eligible to use the Rural Transport Fund Dial-a-Lift services.

1. I live in a rural area; i.e. an area not covered by the Urban Disability Action Transport Scheme
2. I have difficulty accessing everyday services due to lack of transport.
 - I do not have access to a car.
 - I do not have access to public transport.

If you **do** have either access to a car or public transport but feel that you may still be eligible for membership please provide supporting information in the box below.

Important:

Members should note that should the demand for Dial-a-Lift services exceed the amount of resources available, trips will be prioritised on the following basis: To assist us please tick all statements that apply to you as an individual.

- Older person (60+)
- Person with a disability
- Person with no access to suitable public transport – this is considered as
 - being more than 1 mile from nearest bus stop
 - being on a route that provides **less than** two return journeys per week between the hours of 10AM to 4PM; or
 - being on a route that **only** provides services outside of the hours of 10AM to 4PM
- Person with dependants (dependants include children under 18, older people and dependants with disabilities)
- Other

If the services are still over-subscribed then other restrictions may apply.

Emergency Contact details

Please provide details of a relative, friend, neighbour, carer or social worker who could be contacted on your behalf in the event of an emergency.

NAME: _____

RELATIONSHIP TO YOU: _____

TELEPHONE NO: _____

MOBILE NO: _____

Tell us about yourself

This section is being used so that we can tell our drivers what additional assistance you may require.

PLEASE TICK THE BOXES BELOW WHICH APPLY TO YOU.

1a I use a wheelchair:

1b My wheelchair is:

Power chair Manual chair

Make:

Model:

1c I use a scooter

1d I use a walking aid

1e I can transfer from my wheelchair to a seat

2 I require assistance getting from my front / back door to the vehicle

Please note that our staff will not enter your home / place of residence / destination.

3a I have a medical certificate exempting me from wearing a seatbelt

3b I enclose a photocopy of my certificate

4a I am able to travel independently

4b I require an essential companion(s) to travel with me.

If yes, please state why and how many: (maximum 2)

Please note that under 11s are not permitted to travel unaccompanied.

4c I have dependants who may travel with me; i.e. I am personally responsible for the care of a child, older person or a person with a disability.

If you have ticked the above question, please state how many:

5 I have an assistance dog

6 I have a learning difficulty

7 I have a hearing difficulty

8 I have a visual disability

9 I have a communication disability

Please note that a risk assessment will be carried out by our organisation, as and when required, to ensure that you can travel safely in our vehicles.

Equality Information

This information is required for equality monitoring and statistical purposes only. As a result we are asking you to answer the following questions. However you do not have to answer them.

1. Gender

- Male Female Transgender

2. Religion:

- Protestant Other religion
 Catholic No religious belief

3. Marital status:

- Single Civil Partnership
 Married Separated
 Widowed Divorced

4. Ethnicity:

- White Black
 Eastern European Asian
 Other

5. Sexual Orientation:

- Heterosexual Homosexual
 Bisexual

6. Dependants?

(i.e. I have personal responsibility for the care of a child / older person / person with a disability).

- Yes No

Privacy Notice

WHAT IS THE PURPOSE OF THIS DOCUMENT?

Easilink Community Transport is a “data controller”. This means that we are responsible for deciding how we hold and use personal information about you. We are providing this privacy notice because you are applying to use our community transport services. It makes you aware of how and why your personal data will be used, namely for the purposes of providing community transport services, and how long it will usually be retained for. It provides you with certain information that must be provided under the General Data Protection Regulation – also known as GDPR.

DATA PROTECTION PRINCIPLES

We will comply with data protection law and principles, which means that your data will be:

- Used lawfully, fairly and in a transparent way.
- Collected only for valid purposes that we have clearly explained to you and not used in any way that is incompatible with those purposes.
- Relevant to the purposes we have told you about and limited only to those purposes.
- Accurate and kept up to date.
- Kept only as long as necessary for the purposes we have told you about.
- Kept securely.

THE KIND OF INFORMATION WE HOLD ABOUT YOU

In connection with your application for community transport services, we will collect, store, and use the following categories of personal information about you:

- The information you have provided to us in this application form and any covering letter.
- Any updated information you provide to us in the future.

We may also collect, store and use the following types of more sensitive personal information:

- Information about your physical and mental health, including any medical condition.
- Information about your race or ethnicity, religious beliefs, sexual orientation and political opinions.

HOW IS YOUR PERSONAL INFORMATION COLLECTED?

We collect personal information about you from the following sources:

- You, as an existing or potential member.
- From third parties (such as family members or carers).

HOW WE WILL USE INFORMATION ABOUT YOU

We will use the personal information we collect about you to:

- Consider your application for community transport services.
- Provide you with community transport services if your application is successful.
- Comply with legal or regulatory requirements.

It is in our legitimate interests to decide whether we can provide community transport services to you and, if your application is successful, to provide those services to you, as it would be beneficial for our business to do so.

We also need to process your personal information to decide whether to enter into a contract for the provision of community transport services with you.

Having received your application form, we will process that information to decide whether you qualify to receive our community transport services. If we do agree to provide you with community transport services, then we will use the personal information to provide you with those services.

If you fail to provide personal information

If you fail to provide information when requested, which is necessary for us to consider your application, we will not be able to process your application successfully. For example, if you do not provide us with the information we need to assess your entitlement to community transport services, we will not be able to take your application further.

HOW WE USE PARTICULARLY SENSITIVE PERSONAL INFORMATION

We will use your particularly sensitive personal information in the following ways:

- We will use information about your health and disability status to consider what vehicle to use to provide our community transport services to you. We may also use this information to assist the emergency services in the event that you require medical attention whilst using our services.
- We will use information about your race or national or ethnic origin, religious, philosophical or moral beliefs, or your sexual life or sexual orientation, to ensure meaningful equal opportunity and diversity monitoring and reporting.

AUTOMATED DECISION-MAKING

You will not be subject to decisions that will have a significant impact on you based solely on automated decision-making.

DATA SHARING

Why might you share my personal information with third parties?

We will only share your personal information with the following third parties for the purposes of processing your application and providing you with community transport services:

- Organisations you ask us to share your data with;
- Providers of software and/or services that we use to provide community transport services (such as the electronic storage of your application form and details such as your name and address).

All our third-party service providers are required to take appropriate security measures to protect your personal information in line with our policies. We do not allow our third-party service providers to use your personal data for their own purposes. We only permit them to process your personal data for specified purposes and in accordance with our instructions.

Unless you request us not to do so, we will share the information in the section headed “Equality Information” with the Government department that provides our funding. This information will be shared for equal opportunity and/or diversity monitoring and reporting and will only include the information set out in that section.

DATA SECURITY

We have put in place appropriate security measures to prevent your personal information from being accidentally lost, used or accessed in an unauthorised way, altered or disclosed. In addition, we limit access to your personal information to those employees, agents, contractors and other third parties who have a business need-to-know. They will only process your personal information on our instructions and they are subject to a duty of confidentiality.

We have put in place procedures to deal with any suspected data security breach and will notify you and the Information Commissioner’s Office of a suspected breach where we are legally required to do so.

DATA RETENTION

How long will you use my information for?

We will generally retain your personal information for a period of 6 years after we cease to provide you with community transport services.

We retain your personal information for that period so that we can:

- Keep our records up to date.
- Respond to any questions, claims or complaints and to resolve disputes.
- Comply with our legal obligations.
- Prevent abuse.
- Ensure that we are able to fulfil our legal and contractual duties.

For very good reasons, we may keep your data for longer than the period stated above, such as if you were involved in an accident whilst using our services. If we cannot delete

your data for legal, regulatory, or technical reasons, we will make sure that your privacy is protected and only use it for those purposes.

After this period, we will securely destroy your personal information in accordance with applicable laws and regulations.

RIGHTS OF ACCESS, CORRECTION, ERASURE, AND RESTRICTION

Your rights in connection with personal information

Under certain circumstances, by law you have the right to:

- Request access to your personal information (commonly known as a “data subject access request”). This enables you to receive a copy of the personal information we hold about you and to check that we are lawfully processing it.
- Request correction of the personal information that we hold about you. This enables you to have any incomplete or inaccurate information we hold about you corrected.
- Request erasure of your personal information. This enables you to ask us to delete or remove personal information where there is no good reason for us continuing to process it. You also have the right to ask us to delete or remove your personal information where you have exercised your right to object to processing (see below).
- Object to processing of your personal information where we are relying on a legitimate interest (or those of a third party) and there is something about your particular situation which makes you want to object to processing on this ground. You also have the right to object where we are processing your personal information for direct marketing purposes.
- Request the restriction of processing of your personal information. This enables you to ask us to suspend the processing of personal information about you, for example if you want us to establish its accuracy or the reason for processing it.
- Request the transfer of your personal information to another party.

If you want to review, verify, correct or request erasure of your personal information, object to the processing of your personal data, or request that we transfer a copy of your personal information to another party, please contact Caroline in our Strabane office or Fiona in our Omagh office in writing.

RIGHT TO WITHDRAW CONSENT

When you submit your application to us, you provided consent to us processing your personal information for the purposes of assessing your application and to provide you with community transport services. You have the right to withdraw your consent for processing for that purpose at any time. To withdraw your consent, please contact Caroline in our Strabane office or Fiona in our Omagh office. Once we have received notification that you have withdrawn your consent, we will no longer process your application and we will no longer supply you with community transport services and, subject to our retention policy, we will dispose of your personal data securely.

DATA PRIVACY MANAGER

We have appointed a data privacy manager to oversee compliance with this privacy

notice. If you have any questions about this privacy notice or how we handle your personal information, please contact Claire Russell (Easilink Chief Executive). You have the right to make a complaint at any time to the Information Commissioner's Office (ICO), the UK supervisory authority for data protection issues.

CHANGES

We may change this Privacy Notice at any time and from time to time. All updates and amendments are effective immediately upon notice, which we may give by any means.

WHAT DO I DO NOW?

- ▶ Please ensure that you have completed the form and that you have signed and dated it overleaf.
- ▶ If you are exempt from wearing a seatbelt, please ensure you have enclosed a copy of your exemption certificate.

Please detail below any further relevant information which you feel we may need to know with regards your travel needs:

To assist us with market research, could you please tell us where you learned about Easilink Community Transport:

Return the completed form to the address below:

Easilink Community Transport
Unit 12, Strabane Enterprise Agency
Orchard Road
Strabane
BT82 9FR

Telephone 028 7188 3282

Text phone:

Easilink Community Transport
Unit 29B Gortrush Industrial Estate
Omagh
BT78 5EJ

Telephone 028 8224 8140

E-mail:

DECLARATION

I confirm that the information I have given is correct and that I am responsible for ensuring that Easilink Community Transport is kept informed of any relevant changes in my personal health or circumstances.

I understand that if I do not sign this form then Easilink Community Transport will be unable to process my application.

I acknowledge receipt of the privacy notice set out in this Application Form.

I understand that by signing this form I agree to abide by the terms and conditions of membership set out by Easilink Community Transport and that all the information provided within this form is true and accurate. I understand that my membership can be refused or revoked if this information is incorrect, if I fail to inform Easilink Community Transport of any relevant changes to my personal health or circumstances or if I fail to comply with the terms and conditions of membership.

Signature _____ **Date:** _____

Please tick if you have received, read and understood the organisation's Passenger Charter.

If you have not received or have any difficulty understanding the Charter, please do not hesitate to contact the office.

Under 16s applications must be countersigned by a parent / guardian.

Countersignature: _____

If you are signing on behalf of the applicant, please **print** your name and relationship to them: e.g. Friend / Relative

Name: _____ Relationship: _____

Could you please give us some basic directions to your house which can be passed on to our driving staff:

FOR OFFICIAL USE ONLY

Issue Date:		Guidelines:		Initials:	
Comp. Entry Date:		Completed By:		Membership No:	
Renewal Date:		Completed By:			