

***SENIOR DRIVER INTERVIEW (MUST BE COMPLETED WITH LICENSE FORMS)***

**NAME:**

**NUMBER/PREVIOUS RACE NUMBERS:**

**OCCUPATION:**

**FAMILY MEMBERS:**

**SPONSORS:**

**HOBBIES:**

**YEARS RACING:**

**YEARS RACING STOJKARTS:**

**MAJOR TITLES/AWARDS:**

**PREVIOUS RACING EXPERIENCE:**

**TEAM MEMBERS:**

**FAVOURITE TRACK:**

**LEAST FAVOURITE TRACK:**

**FAVOURITE FORMULA:**

**TRACK YOU WISH YOU COULD HAVE RACED AT:**

**BEST RACE/EXPERIENCE ANY FORMULA:**

**BEST RACE/EXPERIENCE IN STOJKARTS:**

**WORST RACE/EXPERIENCE ANY FORMULA:**

**WORST RACE/EXPERIENCE IN STOJKARTS:**

**WHAT MADE YOU DECIDE TO RACE STOJKARTS:**

**IF MONEY WAS NO OBJECT, WHAT WOULD YOU RACE:**

**WHAT CHANGES WOULD YOU LIKE TO SEE IN THE FORMULA:**

**ANYONE YOU WOULD LIKE TO THANK:**