

Application for travel assistance for pupils with special educational needs and disabilities (SEND) and all young people applying for post 16 travel assistance



Information

You can find our transport policies and apply on-line at

www.bradford.gov.uk/education-and-skills/travel-assistance/assistance-with-travel-to-home-school-and-college/

You should complete an application form if:

- Your child is starting at school
- You change address
- Your child changes school
- Your child will be attending sixth form
- You are a student at college

If you are applying for a bus pass to school up to and including year 11, this should now be made through West Yorkshire Combined Authority (Metro). Visit www.wymetro.com/TicketsAndPasses

Would you like to take your child to and from school?

If your child is eligible for assistance we can pay a personal transport assistance budget based on a mileage allowance of £0.75 per mile to allow you to make your own travel arrangements for your child, provided that it is more cost effective.

Please tick if you would like to make your own arrangements and receive a personal transport assistance budget. []

Important

Please complete sections 1 -14 and ask your school / college to complete section 15. If you are applying for 6th form or college please also complete the post 16 sections.

- Please complete this form using BLOCK CAPITALS and a blue or black pen.
- Only send photocopies as evidence. Original documents cannot be returned.
- There is no need to send EHCPs or SEN statements as we have these.
- Incomplete forms will be returned

If you need help to complete this form please contact the Travel Assistance Service on 01274 439450 or speak to the special educational needs coordinator (SENCO) at your school.

1. Please say in which school year you require travel assistance.

This school year [] OR The next school year []

The deadline date for your application is the last Friday in May for travel assistance to start in the following September. However, the sooner you apply, the sooner we can confirm if your application has been successful and if so confirm the travel arrangements.

2. Please give details of the school your child will be travelling to:

Name of school or placement	
Address	
Postcode	
School telephone number	

3. Your details: Mr / Mrs / Miss / Ms / Mx		4. Your child's details:	
Your full name		Your child's full name	
Address		Address	
Postcode		Postcode	
Home / Mobile numbers		Date of Birth: dd/mm/yy Age: Male [] Female []	
Email:			
Does your child attend the school as a "managed move" admission arrangement? Yes / No			
If your child is a looked after child, please state from which local authority:			
Social worker's name:		Tel No:	
Email:			

5. Emergency contact details	6. Your previous address if you've moved house since your child started at this school
Name:	Address: Postcode: Date of move: dd/mm/yy
Address:	
Postcode:	
Home number:	
Mobile number	
Email:	
Please note, in an emergency, if we are not able to drop your child off at home (for instance, because no one is at home) then we would use the emergency address. We would try and call you first.	

7. When would you like assistance with travel to start?

Start date dd/mm/yy

Start time finish time

If eligible for travel assistance, your child will be provided for one morning journey from your home address to school and one afternoon journey from school back home. This would happen at the normal school start and finish times. If your child attends part-time or has a more complex journey, please tell us the details:

8. Please tell us why you are applying for travel assistance for your child. You will need to provide copies of supporting evidence. You may be eligible for more than one reason so tick all boxes that apply to you.

Because of the distance from my home to school.

[]

The nearest suitable school means the school (including an academy or free school) with places available that provides education appropriate to the age, ability and aptitude of your child, and any special educational needs that your child may have. This might not be the school you have chosen. Please check the policy for further details regarding age and distance.

Eligibility based on religion or belief is linked to Maximum Working Tax Credit or where a child is eligible for Free School Meals. These rules may change the distance limit and include more eligible schools. Please check the policy if you need further details.

I am in receipt of maximum Working Tax Credit.

[]

My child is entitled to free school meals.

[]

Please provide a full copy of the HM Revenue & Customs 'Tax Credit Awards Notice' for the relevant year.

My child is aged between 11 and 16, is entitled to free school meals, or the parent is in receipt of maximum Working Tax Credit, and my child attends school:

- on the basis of my religion or belief.
- on the basis of my lack of religion or belief.

[]

[]

Please provide a copy of the certificate of baptism, christening or confirmation, or a letter from the faith leader confirming the faith. Where your nearest school is a faith school, please attach a written statement of your reasons for not choosing that school due to your lack of belief. Please check the policy if you need further details.

My child has a disability, special educational need or temporary medical condition

[]

Please attach copies of medical evidence to support your application. Please note that we do not copy or return any original documents.

My child has a Statement of Educational Needs or an Education Health and Care Plan.

[]

There is no need to provide evidence of a Statement of Educational Needs or an Education Health and Care Plan.

I have a disability and am unable to take my child to school.

[]

If both parents/carers have a disability and are unable to take their child to school, please provide supporting evidence from the hospital consultant about each parent or carers' disability.

My child is staying with a relative because I am in hospital and am unable to take my child to school.	[]
My family is fleeing from violence.	[]
My family is temporarily being re-housed due to eviction.	[]

In specific circumstances discretionary assistance will be granted for a limited time period if the family have been evicted from the family home, the family is fleeing domestic violence or if your child is staying temporarily with relatives because you are in hospital. **In each case supporting evidence is required.**

9. Please give full details of your child’s medical diagnosis and why they require assistance with travel.

Please send additional supporting documents with this form. The information that you give us will help us determine if your child qualifies for assistance with travel and what is the most suitable provision. **Remember that we do not know your child and may not be aware of all their medical needs or disabilities. We need to know everything that is relevant about your child’s circumstances and how it impacts on their travel needs.**

Can walk unaided [] aided [] distance [] can walk up steps [] (Tick as appropriate)

10. Please tell us how your child travels outside of school. For example at weekends and on family trips.

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11. If your child needs to travel in a wheelchair please give details.

Type:	Wheelchair		Crash-tested Buggy		Manual [] Electric []
Size:	Standard		Large		

Details of any attachments:

Does your child currently travel in a booster seat? [] or child seat? [] please tick if applicable.

If your child has a collapsible wheelchair, your child may need to travel in the wheelchair depending on the type of transport provided as it may not be possible to store the collapsible wheelchair.

12. Does your child need any equipment when they are travelling - such as a suction machine, oxygen, walking aids or collapsible wheelchair?

Please give details:

13. Please give full details of any behaviours, anxieties, phobias and vulnerabilities which your child may have when travelling and why you think this may mean assistance with travel is required.

Please send additional supporting documents with this form. The information that you give us will determine if your child qualifies for travel assistance and what is the most suitable provision. Children aged over 8 will not automatically be allocated an escort. **Remember that we do not know your child** so it is important that you let us know everything that is relevant about their behaviours and vulnerabilities and how this impacts on their travel needs.

Data Protection – Please be aware that the information you supply on this form will be used to assess eligibility for assistance with travel to school. It will be recorded on a computer (including a photograph if required) and, if successful, the information may be shared with the West Yorkshire Combined Authority (Metro), bus pass suppliers and external suppliers of transport. All data will be held in accordance with the Data Protection Act 1998.

14. Declaration by Parent/Carer

In applying for assistance with travel, your signature below is taken as your acceptance of the following:

- I confirm the information on this application form is correct, complete and based on appropriate professional medical and behavioural advice.
- I understand Bradford Council relies on the information I supply to determine the level of support it offers. If any of my responses are later found to be false or inaccurate the Council can withdraw or change provision.
- I have enclosed the extra information and supporting evidence I want you to consider.
- I accept that assistance will be given in accordance with the Terms and Conditions of Travel stated in Bradford Council's "Home to School Travel and Transport Policy for Children of Compulsory School Age".
- I agree this information may be shared with the West Yorkshire Combined Authority (Metro), with their supplier of travel passes and external suppliers of transport, for example bus companies and taxi operators.
- I will inform the School Travel Service immediately of any changes if my child moves house or changes school, or if there are other changes in my circumstances that affect my eligibility for assistance.

- I accept that Bradford Council may withdraw assistance with travel, with due notice, if my circumstances change and I no longer meet the qualifying criteria.
- I agree to support the behaviour policy and understand that Bradford Council has the right to confiscate the travel pass or withdraw provision of assistance temporarily or permanently in serious or persistent cases of misbehaviour.

Print full name		Relationship to child	
Signature		Date	

15. Information from School/College

This section must be completed by a member of school staff who knows the child/student sufficiently to make a judgement of their travel needs, including their potential for greater independence/travel training.

Please let us know anything about this child that will impact on the type of travel assistance that we provide. For example are the behaviours, anxieties, phobias and vulnerabilities described in section 13 accurate and what are the impacts for mobility/travel? If you take the child out of school on trips/visits what special provision do you make? For example does the child travel in their own vehicle with their own escort or do they travel in a group with a shared escort?

Comments:

Print contact name and position		Name of school/college	
Signature		Date	

Please read this form through carefully and check that all parts are filled in and where appropriate have a printed name and a signature. Incomplete forms will be returned.

Check List:

- All parts of application completed
- Supporting evidence included
- Signed declaration by parent/carer
- Section 15 of the form has been completed by your child's school/college

Return this form to: Travel Assistance Service, Margaret McMillan Tower, Prince's Way, Bradford BD1 1NN

Post 16

You MUST complete all sections of this form. Failure to do so will result in the form being returned.

16. Information about your course

Name of the school or college you will attend								
School or college address where you will be based								
What is the title of your course?								
What qualification are you studying for?								
How many years does your course last?								
Which year of the course will you be studying in?	1st		2nd		3rd		Other	
Are you repeating any year of the course?				Yes		No		
Does your course include at least 12 hours attendance each week at school/college?				Yes		No		
Is the school or college attended on the basis of your parent's belief or lack of belief?				Yes		No		
Is this the nearest school or college to your home address offering this course or a similar course?				Yes		No		
If no, have you also applied to the nearest school or college?				Yes		No		
If this is not the nearest school or college to your home offering this course or a similar course, please give reasons why you have chosen this one.								

17. Student details

Will you be at least 16 and not older than 19 on 1 st September?	Yes		No	
Are you entitled to free meals at your college / 6 th form?	Yes		No	
Does your journey involve travelling out of the West Yorkshire District?	Yes		No	
Will you reach the age of 19 years in the academic year?	Yes		No	
Have you applied to the school for a bursary to help with your transport needs?	Yes		No	
Are you currently receiving assistance from the school / college Bursary Fund?	Yes		No	
Are you or have you been in public care?	Yes		No	
Do you have a disability or special educational need?	Yes		No	
If yes, do you have a Statement of Educational Needs or an Education Health and Care Plan?	Yes		No	

18. Evidence: Complete this section if you do not have a disability or special need, please tick the evidence you have enclosed in support of your application.

Evidence of your entitlement to free meals.	
Other, please state:	

19. Assessment for suitability for travel training.	
<p>All eligible applicants will be assessed for suitability for travel training from the information made available. If suitable the applicant will be contacted by the Travel Training Team and a formal assessment of suitability will be conducted. If an assessment is declined by the parent/carer travel assistance will cease to be provided.</p>	
<p>Please tick that you understand that assistance will stop if an assessment is declined?</p>	

20. You MUST complete this section. Options for consideration if the young person qualifies for assistance.	
<p>If you are able to undertake and successfully complete a course of travel training for the journey to and from school or college the suitable travel arrangement will be a pass for use on public transport.</p>	
<p>If you are not able to undertake and successfully complete a course of travel training the Council will offer you a choice of provision depending on your age.</p>	
<p>Choice 1: Available from age 16 to 18 years only. A travel arrangement by minibus or taxi for which a charge of £370 per year will be made. Please indicate your preference by ticking this box. []</p>	
<p>To be eligible for this assistance the learner must be:</p>	
<p>(a) Aged 16-19 with a Statement of Special Educational Needs or an Education Health and Care plan and attending a special school in educational Year 12, 13, 14; and</p>	
<p>(b) attending their nearest college or school 6th form providing facilities and a study programme suitable to their needs, and</p>	
<p>(c) that school or college is beyond 3 miles from their home</p>	
<p>Choice 2: Available from age 16 to 25 years. You can claim a payment of £7.90 per day for travel costs instead of having transport arrangements made for you. Please indicate your preference by ticking this box. []</p>	
<p>To be eligible for this assistance the learner must be:</p>	
<p>(a) Aged 16-19 with a Statement of Special Educational Needs or an Education Health and Care plan and attending a special school in educational Year 12, 13, 14; or</p>	
<p>(b) Aged 19-24 with an Education Health and Care plan, having enrolled on the course before their 19th birthday; or</p>	
<p>(c) Aged 19-24 with an Education Health and Care plan, where the Authority, because of the needs of the student, has deemed it necessary they enrol on a course after their 19th birthday; and</p>	
<ul style="list-style-type: none"> • Attend the nearest college or school 6th form providing facilities and a study programme suitable to their needs • And that school or college is beyond 3 miles from their home 	

21. Declaration by school or college representative			
<p>Your signature is taken as confirmation of the following:</p> <ul style="list-style-type: none"> • I confirm that the above-named student has been offered a place / will be continuing on the above named course and qualification. • The information provided by the student about the number of years the course lasts, the year in which the course is being studied, and whether the student is repeating any year of the course is correct. • The student will be attending school or college for a minimum of 12 hours per week. 			
Print school/college contact name		Position	

Signature school/college contact		Date	
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Return this form to: Travel Assistance Service, Margaret McMillan Tower, Prince's Way, Bradford BD1 1NN
The wording in this application form can be made available in other formats such as large print or Braille. Please call 01274 439450