

Free School Transport Application Form

PLEASE USE BLACK INK AND BLOCK LETTERS

| | n | | | | | | |
|--|--|---|---|----------------------------------|----------------------|--------------|--|
| House Number | louse Number Street Name | | | | | | |
| City/Town | | | | Postcode | | | |
| Date of Birth | ate of Birth Current Stage (e.g. P1, S | | | Gender | MALE | FEMA | |
| Please provide the full name | es of any siblings of | currently receiving trans | port and the school | they are attending | | | |
| Full name | | | School | | | | |
| ull name | | School | | | | | |
| Full name | | | School | School | | | |
| Full name | | | | | | | |
| Full name | | | School | | | | |
| Full name | | | School | | | | |
| Full name | | | School | School | | | |
| Full name | | | School | School | | | |
| Full name | Full name | | | | | | |
| Full name | | | School | School | | | |
| Name of School/Centre (for v | vnich transport is being | g requested) | | | | | |
| | vnich transport is being | y requested) | | Postcode | | | |
| | | y requested) | | Postcode | | | |
| Address of School/Centre | required | y requested) | | Postcode | | | |
| Address of School/Centre Date from which transport is | required ntre | | | Postcode | | | |
| Address of School/Centre Date from which transport is Name of previous school/ce | required ntre ort please state which ory school you sho o secondary schoo while arrangements | school/centre uld apply when you reg I you should apply in No | ovember of his or he | chool. | chool. You can apply | v at a later | |
| Address of School/Centre Date from which transport is Name of previous school/ce If in receipt of school transport If your child is starting prima If your child is transferring to but there could be a delay w If you move house at any tin | required ntre ort please state which ory school you sho o secondary schoo while arrangements | school/centre uld apply when you reg I you should apply in No | ovember of his or he | chool. | chool. You can apply | r at a later | |
| Address of School/Centre Date from which transport is Name of previous school/ce If in receipt of school transport If your child is starting prima If your child is transferring to but there could be a delay w If you move house at any tin | required ntre ort please state which ry school you sho b secondary school while arrangements ne during the year | school/centre uld apply when you reg I you should apply in Notes are made. , a fresh application sho | ovember of his or he | chool. | chool. You can apply | at a later | |
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| Address of School/Centre Date from which transport is Name of previous school/ce If in receipt of school transport If your child is starting prima If your child is transferring to but there could be a delay w If you move house at any tin APPLICATION DETAILS This application is based on Walking distance | ort please state which ort please state which ory school you sho o secondary school while arrangements one during the year oreason of: (please | school/centre uld apply when you reg I you should apply in Nos are made. , a fresh application sho | ovember of his or helpfuld be made. Safety | chool. Iast year in primary so | | | |
| Address of School/Centre Date from which transport is Name of previous school/ce If in receipt of school transport If your child is starting prima If your child is transferring to but there could be a delay w If you move house at any tin APPLICATION DETAILS This application is based on | ort please state which ort please state which ory school you sho o secondary school while arrangements one during the year reason of: (please) | school/centre uld apply when you reg I you should apply in Nos are made. , a fresh application should apply in the same made. | Safety If there is no rest. the school. Ple | chool. | g route between your | r home and | |
| Address of School/Centre Date from which transport is Name of previous school/ce If in receipt of school transport If your child is starting prima If your child is transferring to but there could be a delay w If you move house at any tin APPLICATION DETAILS This application is based on Walking distance Shortest walking route between | or required Intre Ort please state which Irry school you shool secondary school Irright arrangements Irreason of: (please) Irreason of: (please) Irreason of: (please) | school/centre uld apply when you reg I you should apply in Nosare made. , a fresh application should apply in Nosare made. d local school s for secondary school. | Safety If there is no rest. the school. Ple | chool. I ast year in primary so | g route between your | r home and | |
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| Address of School/Centre Date from which transport is Name of previous school/ce If in receipt of school transport If your child is starting prima If your child is transferring to but there could be a delay w If you move house at any tin APPLICATION DETAILS This application is based on Walking distance Shortest walking route between. 1.2 miles for primary school PRIVILEGE SEAT APPLICATION DETAILS | ort please state which ort please state which ory school you sho o secondary school while arrangements one during the year oreason of: (please een your home and shools and 2.2 mile oreason of the state of the stat | school/centre uld apply when you reg I you should apply in Nos are made. , a fresh application should apply in Nos are made. d local school s for secondary school. ated transport only) | Safety If there is no re the school. Ple with Land and | chool. I ast year in primary so | g route between your | r home and | |

| a) | Please note the authority's granting of free travel is bound by the operator's/SPT conditions of carriage which as a result of unacceptable behaviour transport may be withdrawn until suitable terms of agreement are reached on future behaviour. | | | | | | |
|---|---|--|--|--|--|--|--|
| b) | understand that, should a privilege place be awarded, Glasgow City Council reserves the right to withdraw transport if the seat is required for child/young person travelling to his/her zoned school or if the contractor reduces the size of the vehicle. | | | | | | |
| c) Please note that if your child attends a school by means of a placing request you are responsible for arranging transport to school. | | | | | | | |
| | I declare that I am applying for transport for my child who is under 16 years of age. | | | | | | |
| | or | | | | | | |
| | I declare that I am over 16 years of age and entitled to apply for transport on my own behalf. | | | | | | |
| I have read and understand the statements made above. | | | | | | | |
| | | | | | | | |
| | me of parent/carer/young person Date | | | | | | |
| Signature of parent/carer/young person | | | | | | | |
| Но | me phone number Mobile phone number | | | | | | |
| Em | ail | | | | | | |

PLEASE NOTE: What we will do with your information

5 DECLARATION

Glasgow City Council is registered under the Data Protection Act 1998. The Council is under an obligation to manage public funds properly. Accordingly information that you provide will be used to ensure all sums due to the Council are paid timeously, e.g. by identifying persons who are non-payers of Council Tax and to improve uptake of Benefits. The information may also be used to prevent and detect fraud. It is also possible that this information may be shared for the same purpose with public bodies, including neighbouring Councils or other organisations, which handle public funds.

The information which you provide on this form will be processed by Glasgow City Council, which is the data controller for the purposes of the Data Protection Act 1998. The personal data that you provide will be used to deal with your correspondence and to let you know what the outcome of this is. The Council will not use your personal data for any other purpose and will not disclose the personal information that you provide to any outside person or organisation except where required to do so by law or with your own consent.

When completed, please send this form to:

Corporate Integrated Transport Unit, Glasgow City Council, 220 High Street, GLASGOW G4 0QW

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