



Application for travel assistance for students aged 16-18 with special educational needs and/or learning difficulties or disabilities - academic year 2024/25

Return to: Home to School Transport sentransport@walsall.gov.uk

Please **read** the Home to School Transport Policy before completing this application form. This can be found on our website [here](#)

Please complete Sections 1, 2, 3, and 4. By completing this form, you confirm that you have read the Post 16 -18 Home to School Transport Policy statement.

An up-to-date EHCP Must be included with the application.

Section 1 – Pupils Personal Information

1.1 Personal details

Surname

Date of birth

First Name

Gender

Home Address

Post Code

Name of Parents/Carers

Email address

Daytime/Mobile number

Name of emergency contact

Contact number

Relationship to child

Which school are you requesting Travel Assistance to?

Name of school (named within the EHCP)

Telephone number

Timetable – We will require your child’s full timetable before travel assistance can commence.

Start Date:

Monday

Tuesday

Wednesday

Thursday

Friday

Section 2: Risk Assessment

The following is required to enable the council to undertake a risk assessment of the pupil's needs when travelling.

In order to ensure each child can travel by the safest and most suitable mode of transport we require as much information as possible. For some pupils not all of their needs will be covered in this assessment and an individual risk assessment is required. In order to make this decision please can you provide the following information:

Risk Assessment

Does your child suffer from any medical condition which might require attention whilst travelling to and from school e.g. epilepsy/asthma/diabetes/allergies/other?

Yes

No

If yes please give details along with medical evidence to support this:

Where appropriate Joint Epilepsy Care Plan (dated within the last 2 years).

Are there any triggers that may affect your child's journey to/from school? (E.g., music, silence etc)

Yes

No

If yes please give details of what they are and how they are managed

Is your child, oxygen dependant, Tube fed or require suction?

Yes

No

If yes please give details and how it will be managed

Wheelchair Users Only

If your child is not a wheelchair user, please move to Section 3

Does your child need to travel in a wheelchair on the vehicle? **Yes** **No**

What is the make and model of the wheelchair?

Is the Wheelchair: **Folding** **Non-folding** **Electric**

Section 3: Income Declaration and payment terms

Low-income students must pay £300 a year towards the cost. Those who do not meet the low-income criteria must pay £600 a year towards the cost. These contributions can be paid by instalments.

Is your child in receipt of Free School Meals? **Yes** **No**

If your child is in receipt of Free School Meals, then you would qualify for the lower contribution of £300.00.

I would like to pay in

**1 annual instalment
(Direct debit)**** **3 termly instalments** **6 half termly instalments**

**If you wish to pay by Direct Debit in weekly/fortnight/monthly instalments this can be arranged through contacting our Income Team, this information can be found on the back of the invoice.

I understand that all personal data given will be held in line with the Data Protection Act and agree for this to be disclosed where appropriate to contractors to allow them to best carry out the service

Name (Parent/Carer)

Date

(On behalf of the young person)

Section 5: Post 16 Payment Agreement

1.1 Name of the Young Person

1.2 Address of the Young Person

1.3 DOB of the Young Person

1.4 The "School"/"College" to be attended by the Young Person

1.5 The "Parent"/"Carer" of the Young Person

1.6 The "Contribution" payable to the Council by the Parent/Carer for the 2023/2024 academic year.

This is an agreement between the Parent/Carer of the Young Person who attends the School/College of the above address and Walsall Metropolitan Borough Council.

The Parent/Carer agrees to pay the contribution to the Council via the Home to School Transport. Payments of the Contribution shall be made in installments as per the attached schedule, following receipt of an invoice from Home to School Transport and subject to the terms and conditions of each such invoice. Failure to pay the contribution will result in the suspension of transport services for the Young Person until payments are bought up to date.

If the transport is not used by the Young Person for ten consecutive working days, regardless of the frequency of days that the Young Person should be attending their School/College, payment may be reduced by a daily amount equivalent to one days' worth of the contribution.

If the Young Person is absent from their School/College they may be entitled to a reduction in their contribution. A maximum reduction to the contribution of the equivalent of 10 daily rates will apply regardless of the length of the actual absence. A reduction will only apply where the Young Person's absence is due to ill health and not for absences related to holidays or non-attendance. The maximum number of reductions to the contribution to take account of the Young Person's absences from their School/College shall be 3 per academic year.

In order to qualify for a reduction in the contribution, Home to School Transport must be informed of the absence within the first 5 days of the start of the Young Person's absence from their School/College and then the length of absence will be confirmed directly with the relevant School/College.

We are unable to waive the contribution if the vehicle cannot run for reasons beyond the Council's control, such as adverse weather conditions.

We reserve the right to withdraw travel assistance at any time if the Young Person becomes a health and safety risk for the Young Person or those around them when they are on the vehicle.

Please note that non-payment of any instalment the contribution will result in transport being withheld. Formal legal procedures may be instigated for the recovery of any outstanding payments of the Contribution, which may involve County Court action.

Agreement

The Parent/Carer, acting on behalf of the Young Person, agrees to pay the contribution for the relevant academic year for travel assistance.

I understand that the Young Person's travel assistance will be suspended should payment of the instalments of the contribution not be made on the required dates.

I agree that the Council will determine the suitability of the travel assistance to be provided for the Young Person. This will be based upon balancing reasonable costs and reasonable travel/waiting times to enable the Young Person to access their School/College at the School/College's general start/finish times and not necessarily the Young Person's own session times. The Young Person may be required to arrive before their own sessions begin and stay after they end to accommodate other students, if the Young person is using shared transport.

The contribution is fixed regardless of the Young Person's number of days travelling, the distance travelled, or the cost to the Council.

I understand that all personal data given by me will be held by the Council in line with applicable current Data Protection legislation and I agree for this data to be disclosed where appropriate to contractors to enable them to provide their transport service for the Young Person.

Declaration: I certify that the information I have provided on this form is true to the best of my knowledge and belief. I acknowledge that I understand that any false or deliberately misleading information on this form and/or supporting papers may invalidate this application and could lead to the withdrawal of an offer of travel assistance.

Total amount due for academic year 2024 / 2025:

£

Name (Parent/Carer)

Date

On behalf of Student

Name (On behalf of the council)

Date