



Please read the transport policy on www.dorsetcouncil.gov.uk/schooltransport or telephone 01305 221060 for a hard copy. To apply for free transport complete and return this form and supporting documents to admissions@dorsetcouncil.gov.uk or **School Admissions (Transport), County Hall, Dorchester, Dorset, DT1 1XJ.**

Child's Details

Child's Legal Surname:	Child's Forename(s):
Known as Surname: <i>(if appropriate)</i>	<input type="checkbox"/> Male/ <input type="checkbox"/> Female Date of Birth: / /
School to which transport is required: Start date:	

Address Details

Current Address:	Postcode:
_____	_____
Future/Previous Address (if moving house):	Postcode:
_____	_____
(Expected) Date of Move:	

Parent/Guardian Details

Mr/Mrs/Miss/Ms:	First Name:	Surname:
Relationship to Child:		
Address (if different from child's):		
Tel No:	Mobile Tel No:	
Email address:		

Date you need the transport:	From :	To :
If your child already attends the school how does your child get to school now?		

Reasons for application

<input type="checkbox"/>	We are on maximum working tax credits/entitled to free school meals*
<input type="checkbox"/>	Denominational Grounds- I was not allocated a school place on denominational grounds but do meet the requirements for this school*
<input type="checkbox"/>	Denominational Grounds - My allocation letter confirmed the school place was allocated on denominational grounds (LA will check and confirm)
<input type="checkbox"/>	We have been involuntarily and temporarily re-housed; I attach a letter with full details
<input type="checkbox"/>	Other reasons* – please provide full details overleaf
* Please attach evidence	

- In some circumstances we may offer a fuel allowance where this is best use of resources. The rate per mile is 13 pence for the shortest driven distance identified on our mapping system.
I own a car and am able to use this to get my child to school.

Surplus Seat

- If we determine that you are not entitled to free school transport, would you be interested in paying for a surplus seat?

Preferred (existing) pick up point if known:

Please indicate, by ticking the relevant box/es, any grounds that apply to your application:

- | | |
|--------------------------|--|
| <input type="checkbox"/> | My child is SEN or has a disability or medical condition that impacts on ability to get to school* |
| <input type="checkbox"/> | My child is a young carer or has a parent who is registered disabled that impacts on ability to get to school * |
| <input type="checkbox"/> | My child is a vulnerable child as identified by the school/professional service that impacts on ability to get to school * |
| <input type="checkbox"/> | My child is in sixth form and previously received free transport |
| <input type="checkbox"/> | My child attends the catchment/nearest school, or the school allocated by the LA as the nearest with a space available |
| <input type="checkbox"/> | We are on maximum working tax credits/entitled to free school meals* |
| <input type="checkbox"/> | I applied for the school on parental preference grounds |

* **Please attach evidence**

Any other relevant information to support your application:

I confirm I have read the policy and include all relevant evidence.

Signed:

Dated:

(If sending this form by email, please type your name in the signature field – this will act as your digital signature)

Transport offered will be in the interests of efficient use of resources. Please do not attempt to travel unless authorised to do so. We will contact you as soon as possible but please bear in mind a period of investigation and procurement is necessary.