

# Application for Primary School Travel Assistance: Academic Year 2024/2025

Please read the following information and guidance before you complete this form.

You may be entitled to receive travel assistance from Sandwell Council **if you are a resident in Sandwell** and your child is:

- of compulsory school age, but under the age of 8 and travelling over 2 miles from home to the nearest qualifying school; or
- aged 8, but under age 11, and travelling over 3 miles from home to the nearest qualifying school; or
- aged 8, but under age 11, and eligible to receive free school meals, or whose family are currently entitled to receive the maximum level of Working Tax Credit and travelling over 2 miles from home to the nearest qualifying school.

**Note: renewal applicants do not need to complete an application form unless circumstances have changed, i.e. change of name, address etc.**

Please ensure that all relevant sections are completed in full and that all documentation is attached securely to the application form. (Photocopies will be accepted, please do not provide original documents.)

Failure to supply correct documentation will delay your application.

- **Sections A, B, C, D and E must be completed by the parent/legal guardian**
- **Section F must be completed by the Head Teacher and stamped by a suitable officer**

## Section A: Pupil's and parent/legal guardian's details (Please complete in ink and CAPITAL LETTERS using your child's legal names)

First name of pupil										Surname of pupil											
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Male or Female					<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	DOB		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Age at 1.9.24		<input type="text"/>	<input type="text"/>
Name, address and postcode of school																					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Year of study		<input type="text"/>	<input type="text"/>	Date of admission to this school												<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If the pupil has recently changed schools, provide the previous school's name, address and postcode

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
Date left		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Reason for leaving												<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### Details of parent/legal guardian

Title				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Surname												<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name								<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	DOB		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			
Relationship to child (Mother/Father/Legal Guardian etc.)										<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
Address and postcode																									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
Contact Phone No.										<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						
Email address										<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>						

**Please note: If this is a temporary address, please also provide a copy of your License agreement.**

✓ as appropriate

**Is the child in Section A in the care of the local authority?**

If yes, this child will already be funded for Home to School Transport through the local authority's payment paid to the carer, so additional support will not be considered. For further information contact your support worker.

Yes  No

**Has the child been permanently excluded or undergone a managed transfer?**

If yes, please indicate as appropriate "excluded" or "managed"

Yes  No   
Excluded  Managed

**Is this the nearest suitable school?**

Yes  No

**Has your child been placed at this school by the Hard to Place Panel or Fair Access Panel?**

Yes  No

**Is your child attending the school to fulfil religious beliefs?**

If yes, complete Section B in full and include the documentary evidence required

Yes  No

**Section B: Denominational/Faith Schools: the religious background of your child**

I confirm that my child is a baptised Roman Catholic and I have attached a copy of the Certificate of Baptism.

Name of parish where baptism took place

Name of current parish

OR

I confirm that my child has been **formally received** into the Roman Catholic Church and I enclose a copy of the **Certificate of Reception**.

Name of parish where baptism took place

Name of current parish

OR

I confirm that my child belongs to a **practising Christian** family and attends church on a regular basis. I have enclosed a **letter of support from our priest/minister/religious leader**.

Name of Christian denomination

Name of regular place of worship

OR

I confirm that my child is a worshipping member of the \_\_\_\_\_ Faith. I have attached a **letter of support from our religious leader**.

Name of regular place of worship

Name of religious leader

**Section C: Additional entitlement**

The Education and Inspections Act 2006 has given additional entitlement to low income families to receive travel assistance for children aged 8, but under 11, who are travelling over two miles from their home to their nearest qualifying school.

Low income families are defined as being eligible to receive free school meals, or whose family are currently entitled to receive the maximum level of Working Tax Credit.

**Are you entitled to receive free school meals?**

Yes  No

**National Insurance Number or NASS Ref Number of Parent/Guardian/Claimant – this MUST be provided**

Is the family currently entitled to receive the maximum level of Working Tax Credit? Yes  No

To confirm your entitlement to **Maximum Working Tax Credit** please provide a **full copy** of all pages of your **current** Tax Credit Awards Notice (TC602).

**Note:** Low income entitlement will be reviewed annually and transport may be withdrawn if you are no longer eligible.

## NOW COMPLETE YOUR CONSENT AND SIGN THE DECLARATION BELOW PLEASE

### Section D: Your Consent

I agree that you will use the information I have provided to process my claim for Scholars' Travel Assistance to verify my initial, and ongoing, entitlement; and that you may contact other sources, such as the Department for Education (DfE) as allowed to confirm this.

Please note that where successful, your details will be passed to the applicable school.

**If you do not consent to the above, we cannot proceed with your assessment, so please ensure that you have thoroughly read the paragraph and ticked the box before submitting this form.**

The Data Controller for the information held about you for this purpose is Sandwell Metropolitan Borough Council, Sandwell Council House, Freeth Street, Oldbury B69 3DB. Phone 0121 569 2200.

The Data Protection Officer can be contacted at the above address and through email at DP\_Officer@sandwell.gov.uk

The information on this form, where you have given us consent to use, will ONLY be used for that purpose and for no other. Where you have not provided us with consent, the information will not be used by the council.

The information provided under consent will only be used and shared for the purposes outlined on this form. However, when a legal duty is placed upon the council then the council will consider the sharing of your information in accordance with that duty (e.g. police etc.).

At any point, you have the right to withdraw your consent by contacting the office below.

For further information in relation to how the council will use your personal information, including how long it will be retained for, please see the council's full privacy notice at [www.sandwell.gov.uk](http://www.sandwell.gov.uk)

### Section E: Your Declaration

The information I have given on this form is complete and accurate. I understand that my personal information is held securely and will be used only for local authority purposes. I agree to the local authority using this information to process my application for Scholars' Travel Assistance. I understand that if my child is granted travel assistance and leaves their current school or changes address within this time, I should advise the local authority immediately. I also understand that failure to do so will result in me being charged for the financial loss incurred by the local authority.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

In accordance with our service standards, eligible claims will be processed within ten working days from receipt of completed application forms. However, if you require further information or assistance, please contact the Education Benefits Team on 0121 569 8331.

**Loss of Swift card and insurance: under no circumstances will the local authority finance the cost of a replacement pass.** It is the responsibility of your child to ensure the safety of the Swift card and we recommend that you arrange insurance cover with the relevant travel provider, if required.

