Application for Secondary 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:

- in Year 7 to Year 11 during the 2024-2025 academic year;
- travelling more than 3 miles from home to school by the shortest pedestrian route;
- attending the nearest appropriate qualifying school with places available.

In addition, the Education and Inspections Act 2006 has given additional entitlement to low income families, and you may be eligible if the pupil is:

- in receipt of free school meals or the family is currently claiming maximum Working Tax Credit; and
- living between 2 and 6 miles from school (15 miles in the case of the **nearest** denominational school);
- attending one of the nearest three schools or the nearest denominational school with places available (not necessarily within the borough of Sandwell.

Change of address

Assistance will only be provided if **ALL** the following criteria are met:

- your child is in Year 10 or Year 11 at the time of change of address; or the address change in temporary.
- transfer to a school closer to home is impractical because of syllabus requirements;
- the distance between home and school by the shortest pedestrian route is 3 miles or greater.

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 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														
Male or Female		DOB	D	D	M	M	Υ	Υ	Ą	ge a	t 1.9	.24			
Name, address and postcode of school															
Year of study Date of admission to this school											M	M	Υ	Υ	

If attending Wood Green Academy as a result of being granted a place based on sporting aptitude or Shireland CBSO for Musical abilities, please provide a copy of the confirmation of acceptance.

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

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	Please provide written evidence to confirm the date of your move if this is a rented or purchased property. A rent agreement or confirmation of your move from the solicitor will be acceptable.																								
	✓ as appropriate																								
ls '	Is the child in Section A in the care of the local authority? γ_{es}																								
lf y	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																								
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	Section B: Denominational/Faith Schools: the religious background of your child																								
confirm that my child is a baptised Roman Catholic and I have attached a copy of the Certificate of Baptism.																									
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OR													-												
	confirm that my child has been formally received into the Roman Catholic Church and I enclose a copy of he Certificate of Reception .																								
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Name of current parish																		
OR																		
I confirm that my child belong enclosed a letter of support											chu	rch d	n a	regu	lar b	asis.	. I ha	ıve
Name of Christian denomina	ation																	
Name of regular place of wo	orship																	
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 wo	orship																	
Name of religious leader																		
Section C: Additional	entitlem	ent																
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 in receipt of 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 Parent/Guardian/Claimant -																		
Is the family currently ent Credit?	itled to r	eceiv	e th	ie m	axim	um	ı lev	el o	f Wc	rkir	ıg T	ax	`	Yes			No	
To confirm your entitlement current Tax Credit Awards				king	j Tax	Cr	edit	: plea	ase p	orovi	de a	a ful	cop	y of	all p	age	s of y	you
Note: Low income entitleme eligible.	ent will be	e revie	ewe	d anı	nually	/ ar	nd tr	ansp	ort i	may	be v	withc	Iraw	n if y	ou a	re n	o lon	ger
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Section D: Your Conse	ent																	
Assistance to verify i	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																		

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.

 $DP_Officer@sandwell.gov.uk$

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

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

is granted travel assistance and leav	application for Scholars' Travel Assistance. I understand that if my child wes their current school or changes address within this time, I should ly. I also understand that failure to do so will result in me being charged local authority.							
Signature of parent/guardian:	Date:							
	dards, eligible claims will be processed within ten working days from ns. However, if you require further information or assistance, please n on 0121 569 8331.							
Loss of travel pass and insurance:								
	ocal authority finance the cost of a replacement pass. It is the the safety of the pass and we recommend that you arrange insurance er, if required.							
Section F: To be completed by	y the Head Teacher							
	is in *full-time/will be in full-time [*delete if not applicable] own in Section A, and that all the pupil's details are correct.							
Signed:	(Head Teacher) Date:							
Name								
School name								
Full school postal address and postc	ode Official stamp							
Contact Phone No.								
Please return your completed form to:	Education Benefits and Transport Sandwell Metropolitan Borough Council PO Box 16230 Sandwell Council House							

Or secure email to: education_benefits@sandwell.gov.uk

Freeth Street Oldbury B69 9EX