Students with Disabilities Transport Program: New Service Request



|  |
| --- |
| **COVER SHEET** |
| School |       | Phone  |       |
| Principal |        | Email |       |
| Address |       |
| Is the school’s student travel database up to date? | Yes | [ ]  | No | [ ]  (update the school’s travel database) |
| **Only schools with up-to-date travel databases will have their new service request applications considered.** |

|  |
| --- |
| **EXISTING SERVICE INFORMATION** |
| Contractnumber | Current serviceprovider | Route | Vehicle | Age | W/C capacityoccupied | W/Ccapacityspare | Currentseatingcapacityoccupied | Currentseatingcapacityspare | Currentrun time |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |

|  |
| --- |
| **EVALUATION QUESTIONS** |
| Is there appropriate capacity on an existing service? | Seat | Yes [ ]  | No [ ]  | Wheelchair  | Yes [ ]  | No [ ]  |
| Is there time capacity on an existing service? | Yes | [ ]  | No | [ ]  |
| Has travel education for new and existing students been considered? | Yes | [ ]  | No | [ ]  |
| Are the students on the bus services eligible for transport assistance? | Yes | [ ]  | No | [ ]  |

|  |
| --- |
| **PROPOSED NEW SERVICE REQUEST**  |
| NB - Please include; existing route maps, proposed route map (if known), all student details including application to travel forms and students suitability/ accessibility to independent Travel, School Bus Program, Public Transport and Conveyance Allowance.      |

|  |  |  |  |
| --- | --- | --- | --- |
| Principal’s signature |       | Date |       |