

Application for Transport Special Case Consideration

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| **SCHOOL DETAILS** |
| School name |       | School contact |       | Contact phone |       |
| **STUDENT DETAILS** |
| Student name |       | Date of Application |       |
| Residential address |       | Postcode |       |
| Date of birth |       | Age  |       | Current year level |       |

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| **APPLICATION DETAILS**  |
| Which type of transport assistance does this application relate to? |
| [ ]  School Bus Program | [ ]  Conveyance Allowance | [ ]  Students with a Disability Transport Program*Proceed to* ***‘Specialist Schools Only’*** *section* |
| Is the student enrolled at their nearest government school according to year level or their nearest non-government school according to denomination? | [ ]  Yes | [ ]  No |
| * If no, what is their nearest appropriate school?
 |       |
| If bus travel is required, is there seating capacity on the service? | [ ]  Yes | [ ]  No | [ ]  N/A |
| What is the exact distance (in km) by the shortest practicable route? | Home to school:     km | Home to bus stop:     km |
| Does the student have any medical conditions?  | [ ]  Yes  | [ ]  No |
| * If yes, briefly detail the medical conditions:
 |       |
| **SPECIALIST SCHOOLS ONLY**  |
| Is the student eligible for the Program for Students with Disabilities or Disability Inclusion Tier 3 student-level funding? | [ ]  Yes – Their funding level is:     | [ ]  No |
| Does student reside in the DTA of the specialist school they are attending?  | [ ]  Yes  | [ ]  No |
| If no, which school DTA are they in? |       |
| **TRANSPORT ASSISTANCE REQUIRED** |
| Please select the reason for submitting an application for special case consideration. Applications that do not meet the guidelines outlined on the DE website will not be considered. <https://www.education.vic.gov.au/PAL/transport-special-case-consideration-info-sheet.docx>  |
| [ ]  Fare exemption to travel on government funded school bus to school other than nearest[ ]  Extension of the route (provide route name, contract # & km’s):      [ ]  Conveyance allowance for public bus yearly fare (provide ticket type):      [ ]  Conveyance allowance for private bus travel[ ]  Conveyance allowance for private car travel**Specialist schools only:**[ ]  Access to a school bus in DTA at existing pick-up point (detail of existing stop and contract #, provide confirmation from operator)      [ ]  Conveyance allowance for private car travel[ ]  Increased Conveyance allowance (include written quotes, see checklist below):      **Other:**[ ]  Other (briefly detail):       |
| images | **Please ensure supporting documentation for this application is provided** |
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| **PARENT/GUARDIAN DETAILS** |
| **Primary parent/guardian** | **Secondary parent/guardian** |
| Full name |       | Full name |       |
| Relationship to student |       | Relationship to student |       |
| Residential address | [ ]  Same as student | Residential address | [ ]  Same as primary parent/guardian |
| [ ]  Other (please specify below) | [ ]  Other (please specify below) |
|       |       |
| Phone |       | Phone |       |
| Do one or both parents/guardians hold a valid driver’s licence? | [ ]  Yes – Primary parent/guardian | [ ]  Yes – Secondary parent/guardian |

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| **TO BE COMPLETED BY THE SCHOOL** |
| SCHOOL ENDORSEMENT |
| Full name |       |
| Position |       | Phone |       |
| * I confirm that the school has endorsed this application for special case consideration.
* I confirm that the application has been discussed with the Network School Bus Coordinator (School Bus Program only)
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| Signature |       | Date |       |
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| **REGIONAL ENDORSEMENT (GOVERNMENT MAINSTREAM SCHOOLS ONLY)** |
| images | Special case applications must be endorsed by your DE region (e.g. SEIL or Regional Director). Please attach evidence of regional office approval. |

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| **CHECKLIST** |
| Please ensure you have provided all the necessary information to support your application. **The application form must be submitted by the school and not a parent/guardian.** |
| [ ]   | School endorsement completed |
| [ ]   | Regional endorsement evidence (email or letter) attached (government mainstream schools only) |
| [ ]   | Other relevant information to support your case attached (e.g. reports from doctors and/or social workers, bus operators, copy of court orders) |
| [ ]  | For Specialist School bus travel: Confirmation from the bus operator that there is capacity on the bus and that the application will not cause travel times to exceed 120 minutes |
| [ ]  | For increased conveyance for a private taxi: written quotes for a private taxi must support this application. The schools to assist families to arrange a taxi card where possible and to manage taxi invoice payments with any approved conveyance funding. |