

Form 8: Application for a New School Bus Service or Feeder Service

# Guidelines for completing a new service request

For all new school bus services or feeder services, please ensure that appropriate consultation and communication has occurred with the school and broader School Bus Network community.

Please consider whether needs can be met by varying or extending an existing route.

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| Date |  | PLEASE ENSURE ALL PAGES ARE COMPLETED  Return the completed form and supporting documents to:  [student.transport@education.vic.gov.au](mailto:student.transport@education.vic.gov.au) |

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| **SERVICE DETAILS** | | | | |
| Network name: |  | | | |
| Coordinating school name: |  | | | |
| Coordinating school address: |  | | Postcode: |  |
| Coordinating principal: |  | | Telephone: |  |
| Bus coordinator name: |  | | | |
| Bus coordinator email: |  | | Telephone: |  |
| Is the network part of the School Bus Management System? | | Yes  No | | |

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| **PURPOSE OF APPLICATION *(check the applicable box)*** | | | |
| **New bus service** | | | |
| What is the proposed distance of the new bus service (from first pick-up point to school?) | km | | |
| Can you confirm that at least 15 students (11 of which are enrolled in a government school) who are eligible for the School Bus Program (live more than 4.8km from their nearest school and more than 1.6km from public transport), live on or near the proposed new service route? | Yes  No | *If no, please do not submit application. Reassess the application or contact the Student Transport Unit for assistance.* | |
| **New feeder service** (A feeder service is used to deliver students to a major bus service) | | | |
| What is the proposed distance of the new feeder service? | km | | |
| Can you confirm that at least 8 (6 in isolated areas) government students who are eligible for the School Bus Program (live more than 4.8km from their nearest school, more than 2.4km from the nearest school bus service and more than 1.6km from public transport) would use the feeder service? | Yes  No | *If no, please do not submit application. Reassess the application or contact the Student Transport Unit for assistance.* | |
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| Please provide the date the new bus service or feeder service is required to become effective: | | |  |

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| **SUMMARY OF THE PROPOSAL** |
| Please provide a summary of what is required for the proposed new service. |
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| Describe the proposed route (including terrain, road surface(s), suitability of turning area(s).  A map must also be provided with this application (see Supporting Documents section). |
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| Is there any additional service information for the area (SBP in the same network, SBP in neighbouring network and public transport services)? |
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| What are the benefits of the proposed service (including the nature of the benefits and the number of students who will benefit)? Names of the benefitting students (including future students) must be provided on page 3. |
|  |
| What are the drawbacks of the proposed service (including the nature of the drawbacks and the number of students who will be disadvantaged)? |
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| List any sections of the route that may present temporary or seasonal difficulties for use by a school bus. |
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| If applicable, are there any special requirements (including conversion for transport of physically disabled students) for the new bus service? Or any special reasons why the normal standard for service provision should not apply? |
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|  | **STUDENTS BENEFITTING FROM THE NEW BUS OR FEEDER SERVICE** | | | | | | | | |
|  | Enter the details of the students who will benefit: At least 15 eligible students of which 11 must be government school students for a new bus service, or at least 8 eligible government school students for a new feeder service. | | | | | | | | |
|  | **Last Name** | **First Name** | **Student Address** | **DOB** | **Year Level** | **Name of Enrolled School** | **Closest Enrolled School? (Yes/No)** | **Distance to Current Bus Stop  (km)** | **Distance to Proposed Bus Stop (km)** |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |
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| **PROPOSED TIMETABLE** | | |
| Please complete the following timetable with the proposed bus stops and times for the new service | | |
| **PROPOSED AM** | | |
| Stop No. | Stop Address | Time AM |
| 0 | Bus depot |  |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
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| 18 |  |  |
| 19 |  |  |
| 20 |  |  |
| **PROPOSED PM** | | |
| Stop No. | Stop Address | Time PM |
| 0 | School |  |
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| **SUPPORTING DOCUMENTS** | | |
| The following supporting documents must be submitted with this application: | | |
| **Document** | **Description** | **Submitted  (where applicable)** |
| School council endorsement | Please attach a copy of the school council resolution endorsing the new bus or feeder service | Yes |
| Municipal engineer endorsement | Please attach a certificate/letter from the local Council/Shire stating the roads to be used are suitable and safe to operate a school bus in all weather conditions. This is only required where proposed travel is on roads that are not A, B, C or M class roads | Yes  N/A |
| Map of proposed service | Enclose a map (your Department of Transport and Planning Contract Manager will be able to supply a current route map if required) indicating:   * Proposed route of new bus or feeder service (coloured RED) * Present school bus route servicing the school (coloured BLUE) * Existing school bus routes in the vicinity of the proposed route variation (dotted BLUE) * School bus route(s) servicing nearby schools in the vicinity of the proposed new service (coloured GREEN) * Existing public transport routes in the vicinity of the proposed new service (coloured BROWN) * Location of the coordinating school (BLUE dot) * Location of nearby schools (GREEN dot) * Place of residence of each student to benefit from the proposed route variation (YELLOW dots numbered according to the students listed in previous section) | Yes |