

# SEND Transport Form

This form must be completed by Parents/carers who wish to apply for travel assistance for pupils with Education, Health and Care Plans or who are unable to walk to school due to their disability or mobility issues.

Applicants must complete the form in FULL and provide as much supporting information as possible. The information provided will be used to assess whether your child may be eligible for travel assistance.

As part of your application, you may be required to provide additional documentation to support your application e.g. medical records, employments records, EHCP's, free school meals and/or working-tax credit. Please note we are unable to return any documentation to you, please ensure you only provide copies that can be destroyed by the authority on completion of your application assessment.

You can save the form and come back to it at anytime.

The application form comprises of 5 sections to complete:

1. Pupil and school information
2. Needs of the child
3. Family home circumstances
4. Contact details
5. Declaration

The information provided in section 1 is used to assess whether TMBC is required to provide you with travel assistance. The information provided in sections 2 and 3 are used to inform which type of assistance may be necessary and provide the transport providers with as much information as possible about your child to ensure they are equipped to meet the child's needs.

Once the form has been received you may be contacted to discuss the next phase.

If travel assistance is declined, you will be notified in writing stating the reason(s) why.

If you disagree with the decision you may appeal. Details on how to do this are explained in the decision letter you will receive once this application has been processed.

**31st May** is the deadline for applications for September transport, any application received after this time may not be guaranteed to be in place for the start of term.

Applicants should allow approximately 30 days from receipt of application / final supporting evidence by TMBC, to travel assistance decision / commencement.

**Please note, if travel assistance is awarded, it will be reviewed every 12 months.**

If your child has an Education, Health and Care Plan (EHCP) they are entitled to a free travel bus/rail pass for use on public transport. You can apply for this pass by contacting Transport for Greater Manchester on 0161 244 1000.

Tameside Metropolitan Borough Council's Policy on the provision of Home to School Transport for pupils with Special Educational Needs is available on our website: <http://www.tameside.gov.uk/education/transport/5-16policy> . Or by contacting the Integrated Transport Unit team by email at: [itu@tameside.gov.uk](mailto:itu@tameside.gov.uk).

\* Required

## 1. Pupil and School Information

*To assess eligibility*

1. Name of Pupil \*

2. Date of Birth (dd/MM/yyyy) \*

3. House Number/Name \*

4. Address Line 1 \*

5. Address Line 2 \*

6. County \*

7. Postcode \*

# SEND Transport Form

8. What is the requested date for transport to commence? (please note, this cannot be guaranteed) \*

9. School Year Group \*

10. Name of School to which Travel Assistance is required \*

11. School/site address (including postcode) \*

12. School start and end time \*

13. Is the pupil a cared for child? \*

Yes ☐

No ☐

14. Does your child have an Education, Health and Care Plan (EHCP)? \*

Yes ☐

No ☐

# SEND Transport Form

15. Do you believe that the pupil would be **unable** to walk to school due to the nature of their special educational need, because they have a disability or mobility issues? \*

Yes ☐

No ☐

16. Details of Need \*

*(Please supply full details of the individual needs of the pupil and why they may not be able to walk to/from school)*

17. Does the pupil's parent(s) have additional needs or a disability which prevents them from assisting or arranging the pupil's attendance, or accompanying them to school? \*

Yes ☐

No ☐

18. If yes, please provide details below: \*

19. Are you in receipt of free school meals or maximum working-tax credit? \*

Yes ☐

No ☐

# SEND Transport Form

20. If yes, please send proof to [htsapplications@tameside.gov.uk](mailto:htsapplications@tameside.gov.uk) with the pupils name as the reference.

## 2. Types of Travel Support

*If eligible, what type of travel support would you consider? (tick all that apply below)*

21. Personal Transport Budget - *(A personal transport budget is a payment designated to you which can be used in any way you wish to ensure your child attends school every day, is picked up and dropped off on time and in a fit state to learn. More information can be found here: <https://tamesidelocaloffer.co.uk/travel-and-transport/> ) \**

Yes ☐

No ☐

22. Independent Travel Training - *(Personalised training for young people with additional needs to access public transport and independently travel) \**

Yes ☐

No ☐

Maybe in the future ☐

23. Supported vehicle - *(This can be an individual taxi or a shared taxi or bus with other pupils) \**

Yes ☐

No ☐

## 3. Individual Child Needs

### Medical, Physical and Communication

*This information is NOT used to determine eligibility for travel support but to ensure the right support can be provided if eligible. Please be as truthful and thorough as possible.*

24. Does the pupil use a wheelchair? \*

Yes ☐

No ☐

# SEND Transport Form

25. Do they use an electric wheelchair? \*

Yes ☐

No ☐

26. If yes to either of the above, what is the make and model of the wheelchair? \*

27. What are the dimensions of the wheelchair? \*

28. Does the pupil use walking aids? \*

Yes ☐

No ☐

29. If yes, please provide details below: \*

30. Can the pupil transfer unaided to a fixed seat in a vehicle? \*

Yes ☐

No ☐

# SEND Transport Form

31. If no, explain how the pupil is currently transported.

32. Does the pupil travel with any medical equipment (e.g. oxygen cylinder)?

Yes ☐

No ☐

33. If yes, please provide details below \*

34. Does the pupil need to wear a harness to travel safely in addition to the vehicle seatbelt?

\*

Yes ☐

No ☐

35. Is the pupil known to or likely to remove a standard seat belt? \*

Yes ☐

No ☐

36. Is the pupil likely to need a seatbelt extension? \*

Yes ☐

No ☐

37. What is their weight in kilograms? \*

# SEND Transport Form

38. What is their height in centimetres? \*

39. Does the pupil exhibit anxiety? \*

Yes ☐

No ☐

40. What are their known triggers? \*

41. Does the pupil have any communication or speech and language difficulties? \*

42. Does the pupil have any of the following medical conditions? *(Tick all that apply)* \*

Diabetes ☐

Asthma ☐

Incontinence ☐

Anaphylaxis  
(allergy) ☐

Epilepsy ☐

None of the above ☐



# SEND Transport Form

If the pupil has **Epilepsy**, then please complete the additional questions below (43, 44, 45):

43. What are the warning signs of a seizure if any? \*

44. How long do their seizures typically last? \*

45. Do they require anything specific following a seizure? \*

46. Does the pupil require any medical support while being transported? \*

Yes ☐

No ☐

47. If yes, please provide details below \*

# SEND Transport Form

48. Does the pupil have any other needs that would impact on their travel to school? \*

Yes ☐

No ☐

49. If yes, please provide details below \*

50. Please provide details of any medication that needs to be taken at school or college.

51. Are there any other specific considerations or accommodations we should be aware of when arranging transportation for the pupil? \*

Yes ☐

No ☐

52. If yes, please provide details below: \*

# SEND Transport Form

## Behaviour

53. Would they attempt to leave a moving vehicle? \*

Yes ☐

No ☐

54. Is the pupil likely to run away? \*

Yes ☐

No ☐

55. Is the pupil likely to challenge authority or refuse to follow passenger assistant/driver instruction? \*

Yes ☐

No ☐

56. If yes, please provide details below: \*

57. Does the pupil exhibit violent or aggressive behaviour? \*

Yes ☐

No ☐

58. If yes, please provide details below: \*

# SEND Transport Form

59. Does the pupil pose any risk to themselves or other pupils? \*

Yes ☐

No ☐

60. If yes, please provide details below: \*

61. Please provide any additional information which you think is important in order for the pupil to travel safely:

## 4. Family/Home Circumstances

62. Do you have any other children living at the address? \*

Yes ☐

No ☐

# SEND Transport Form

63. If yes, please list all other children living at the same address. *(Please provide the following information: Name, Date of Birth, Year group, Current School, School start and end time, Do they have an EHCP?) \**

64. Are you, or another appropriate adult, available to take the young person to school? *(This may include other members of your family or friends and may be via public transport, personal vehicle, walking or an arranged taxi) \**

Yes ☐

No ☐

If **yes**, then please specify the days/time **you are able** to take the young person to school below:

65. Monday

AM ☐

PM ☐

Neither ☐

66. Tuesday

AM ☐

PM ☐

Neither ☐

# SEND Transport Form

67. Wednesday

AM ☐

PM ☐

Neither ☐

68. Thursday

AM ☐

PM ☐

Neither ☐

69. Friday

AM ☐

PM ☐

Neither ☐

***Please note, if you are eligible for free school travel support, you or another appropriate adult must be available at collection and drop-off time to receive the pupil at home. Failure to do so will result in travel support being withdrawn.***

70. Do you or another adult in the household have access to a vehicle? \*

Yes ☐

No ☐

71. Is the pupil able to access this vehicle (i.e. is it suitable for their mobility needs)? \*

Yes ☐

No ☐

72. Can you use this vehicle to transport the child to/from school? \*

Yes ☐

No ☐

# SEND Transport Form

73. If no, please provide details below: \*

74. Please provide any additional information you may think is relevant as the council considers your request for Home to School Travel Support and sent any relevant documents to support your application (e.g. EHCP, medical evidence, risk assessments etc.) to [htsapplications@tameside.gov.uk](mailto:htsapplications@tameside.gov.uk) .

## 5. Contact and Emergency Contact Details

75. Parent/Carer Name \*

# SEND Transport Form

76. Telephone number \*

77. Email \*

**Emergency Contact Details:** *(Please supply the names, addresses and/or landline/mobile numbers of at least **TWO** emergency contacts (**NOT** parents' mobiles or home phone/address details). We cannot process any applications without these details)*

78. Emergency Contact 1 \*

79. Emergency Contact 2 \*



## 6. Declaration

The information you have provided on this form will be treated in confidence for the purpose of assessing eligibility and providing Home to School Transport in accordance data protection legislation (UK General Data Protection Regulations and the Data Protection Act 2018).

The information will be used in accordance with the Education Transport Policy and for the purpose of processing applications for pupil's travel assistance as required to fulfil the Council's duties under legislation, statutory or contractual requirement or obligation.

This authority is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form within this authority for the prevention and detection of fraud. It may also share this information with external organizations whose business is to assist in the service delivery of transport solutions to eligible pupils and with the Department of Education for statistical purposes only. The personal data is not shared with anyone else and will never be disclosed for marketing purposes.

The information contained on this application form will be retained until the pupil no longer requires travel assistance provided by the Council and then for a further 6 years from the date that travel assistance ceases and shall be processed in adherence to your legal rights, which are set out in our privacy notice which can be found at Tameside Metropolitan Borough Council Data Protection Privacy Notice. Your personal data will be stored and used in accordance with this Policy.

Should you require a hard copy of our privacy statement then please contact the Integrated Transport Unit team via email to [itu@tameside.gov.uk](mailto:itu@tameside.gov.uk).

80. By checking this box, you are giving your consent for the council to share information relating to your child with the transport providers selected by the Council for the purpose of delivering the Home to School Transport Service. This will include special category data relating to SEND information. \*

Tick here ☐