



Commissioning, Partnership and Transformation

Application for Travel Assistance for Post 16/19 Learners with Additional Needs

Notes: -

- Applications can only be considered from residents of North Tyneside.
- The information that you provide on this application form will be used by the Transport Team to make an informed decision as to the type of travel assistance to be awarded. It is essential therefore that you provide as much information as possible.
- Once your application has been submitted (along with any supporting documentary evidence) it will be assessed and you will be informed of the decision by letter.
- Please read all of the notes and declarations contained within the form before signing.
- Any incomplete forms will be returned which will delay the assessment process.
- A minimum of 7 days notice is required, therefore early applications are recommended.
- Parents/Carers are responsible for arranging transport to respite, or an alternative address. The service is only provided from the home address to the college.
- Post 16/19 assistance will automatically cease at the end of the school/college term. A new application is required every year.
- The Council consider a term of study to be no longer than 2-3 years. Three years transport assistance is the maximum entitlement for any learner.

The Council will arrange transport to and from college in accordance with its current policy. This may be a temporary/permanent arrangement depending upon the information contained within this application. Transport provision may include, free travel permits, independent travel training, contracted taxi/minibus.

The types of support available are as follows:-

- **School Transport Mileage Rate (Age 5-25)** - Providing funds to the family for them to make their own travel arrangements to and from school/College. This offers greater flexibility for the family relating to timings both to and from school/college for the young person. For further details, please contact The Access Team on (0191) 643 8726.
- **Appropriate Transport Provision (Age 16-25 only)** – The council will arrange appropriate transport for full-time learners.

If the Learner has a vehicle through the Mobility Scheme the Authority will pay a mileage allowance to them.

Learners will be expected to participate in Independent Travel Training if it is offered at the college.

Section 1 – The Learner

1.1 Name:

1.2 Address:

1.3 Date of Birth:

1.6 Does the Learner have an EHC Plan? Yes No

1.7 Is the Learner in receipt of Personal Independence Payment (PIP)?

Yes No

If yes, please indicate what level is received.

Daily Living: Standard Enhanced

Mobility: Standard Enhanced

1.8 Have you applied for or received any other travel support:-

	Applied	Received
(i) Concessionary Travel Pass from Nexus	<input type="checkbox"/>	<input type="checkbox"/>
(ii) A vehicle through the Mobility Scheme	<input type="checkbox"/>	<input type="checkbox"/>
(iii) Bursaries/Grants	<input type="checkbox"/>	<input type="checkbox"/>
(iv) Personalised Budgets	<input type="checkbox"/>	<input type="checkbox"/>
(v) Other (please specify below)	<input type="checkbox"/>	<input type="checkbox"/>

If received please specify the amount of funding support received:-

Section 2 – Parent/Carer Details

The main parents/carers:

2.1 Name:

2.2 Relationship to student:

2.3 Address (if different from above):

2.4 Home Telephone Number:

2.5 Mobile Telephone Number:

2.6 Alternative Emergency Contact:

2.7 Email address:

Notes: -

1. In case of emergencies, the contact details provided above will be used. Should you wish to add any further contacts please do so in the space below.
2. Should travel be awarded in the form of a taxi/minibus then the home address of the learner will be used at all times by the operator.

Section 3 – College Details

Notes: -

1. This section should be completed by learners/carers in Post 16/19 Education (also known as Further Education) based in Schools or Colleges.
2. Applications can only be accepted from Full-Time Students.
3. Although transport will be provided to eligible students, it is not possible to provide transport to meet the demands of individual timetables.
4. The information provided below is a guide that may help us with transport scheduling.

3.1 College/Provision to be attended:

3.2 College/School/Provision address:

3.3 Start date at College/School:

3.4 Course Title:

3.5 Timetable

Monday	Start Time: _____	Finish Time: _____
Tuesday	Start Time: _____	Finish Time: _____
Wednesday	Start Time: _____	Finish Time: _____
Thursday	Start Time: _____	Finish Time: _____
Friday	Start Time: _____	Finish Time: _____

Section 4 – The Learner’s Needs

4.1 Please tick if the Learner has any of the following conditions (tick more than one if appropriate):-

- | | |
|--|--------------------------|
| Learning Difficulties | <input type="checkbox"/> |
| Speech and Language Difficulties | <input type="checkbox"/> |
| Autistic Spectrum Disorder | <input type="checkbox"/> |
| Physical Disabilities | <input type="checkbox"/> |
| Social, Emotional & Behavioural Difficulties | <input type="checkbox"/> |
| Visual Impairment | <input type="checkbox"/> |
| Hearing Impairment | <input type="checkbox"/> |
| Other (please specify below) | <input type="checkbox"/> |

Please describe the condition using any medical terms (i.e. ADHD, Cerebral Palsy, Dyspraxia etc.) and any effect on their mobility.

4.2 Does the Learner need to be accompanied by a Passenger Assistant?

Yes No

4.3 On an evening, weekend or during school holidays does the Learner travel independently?

Yes No

If Yes, what form of transport does the Learner use?

Walking Cycling Public transport Other

4.4 Has the Learner undertaken any form of Independent Travel Training?

Yes No

If No, would the Learner benefit from Independent Travel Training as a life skill?

Yes No

4.5 Does the Young Person travel in a:

- | | | | |
|-------------------|--------------------------|---------------------|--------------------------|
| Manual Wheelchair | <input type="checkbox"/> | Electric Wheelchair | <input type="checkbox"/> |
| Car Seat | <input type="checkbox"/> | Booster Seat | <input type="checkbox"/> |
| Ordinary Seatbelt | <input type="checkbox"/> | Harness | <input type="checkbox"/> |
| Other Equipment | <input type="checkbox"/> | | |

Please give further information about the above question (i.e. Make, Model, Type, Size etc).

4.6 Are there any additional medical needs that the driver would need to be aware of?

- | | | | |
|------------------------|--------------------------|-----------|--------------------------|
| Brittle Bones | <input type="checkbox"/> | Diabetes | <input type="checkbox"/> |
| Incontinence | <input type="checkbox"/> | Asthma | <input type="checkbox"/> |
| Epilepsy | <input type="checkbox"/> | Allergies | <input type="checkbox"/> |
| Other (please specify) | | | |

Section 5 – Declaration

I understand that North Tyneside Council may store, keep and use all information I give them in order for them to provide the appropriate services required. This includes the contents of this form.

I understand that: -

- (i) North Tyneside Council may share this information with other professionals where relevant and necessary, including the transport operator for the purpose of arranging appropriate and safe transport. I understand that North Tyneside Council may also use this information for the wider purpose of statistical data to help monitor their service and/or determine general areas of need.
- (ii) Any personal information you give to us will be processed in accordance with the UK Data Protection Law and General Data Protection Regulation 2018. North Tyneside Council may use the information relating to your application for travel assistance, and may also share the information with other bodies, for the purpose of the prevention or detection of crime or the assessment or collection of any tax.

I confirm that: -

- (iii) I am the Learner or Parent/Carer identified in this application.
- (iv) I agree to inform North Tyneside Council of any changes that may affect eligibility.
- (v) The information provided is correct to the best of my knowledge. I understand that North Tyneside Council reserves the right to suspend transport pending a review or revised risk assessment if necessary.
- (vi) A new application must be submitted each academic year for Post 16/19 learners.
- (vii) I agree to an assessment for Independent Travel Training can be carried at any point.
- (viii) The Learner or Parents/Carers are responsible for arranging transport to respite, or an alternative address. The service is only provided from the home address to the college.

Signed _____ Date _____

Please print name (BLOCK CAPITALS)

Please return this Application to:-

The Access Team
Commissioning, Partnership and Transformation
Quadrant East, Floor 3
Cobalt Business Park,
NE27 0BY

If you wish to make an enquiry or have any concerns over the completion of this form please contact us on (0191) 643 8726 or email: hometoschooltransport@northtyneside.gov.uk

General Notes: -

1. The completion of an application form does not guarantee that support will be provided.
2. Applications for Post 16 Learners must be completed annually.
3. If North Tyneside Council does provide assistance and your circumstances change, the School Transport Team should be informed immediately as this may affect the agreed provisions.
4. If you take advantage of the School Transport Mileage rate and decide to arrange your own transport, North Tyneside Council asks that you advise the school/college accordingly and ensure that the arrangement is in accordance with any school/college rules whilst on school/college premises.
5. Any transport assistance agreed will be to and from the home address only.
6. Where transport is arranged and the Learner is not ready at the appropriate collection time, the driver will continue on with the rest of the route. It would then become parent/carer responsibility to ensure the Learners attendance at school/college on that particular day.