



ST HELENS  
BOROUGH COUNCIL

# Application for Travel Assistance for Pupils with Special Educational Needs

Up To Year 11 For Academic Year 2020-2021

## Part 1: Pupil Details

Full name of pupil:

Date of birth:

Male/Female:

Current address:

Name of School to which travel assistance is requested:

## Part 2: Details of Parent or Carer

Mr/Mrs/Ms/Miss

First Name:

Surname:

Relationship to the pupil:

Permanent Home Address (if different from pupil):

Post Code:

Contact Telephone Number (Mobile/Landline):

## Part 3: Detail of Emergency Contact Details if Parent/Carer cannot be contacted

Mr/Mrs/Ms/Miss

First Name:

Surname:

Relationship to the pupil:

Contact Telephone Number (Mobile/Landline):

## Part 4: Social Care Details (if applicable)

To be completed if your family is currently involved with Social Care

Name of Social Worker:	Contact Telephone Number:
Is the pupil a Looked After Child to St.Helens Local Authority?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the pupil Looked After by another Local Authority? If yes, please state name of Local Authority:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the pupil currently access respite provision? If yes, please provide details:	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Part 5: Educational Needs

Does your child have an Education, Health and Care Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, can you provide a copy of their Education, Health and Care Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you cannot provide a copy of their Education, Health and Care Plan, do you give consent to School Transport to access their Plan from the Additional Needs Team?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please note:  
If your child does not have an Education, Health and Care Plan, the application will be processed in accordance with the local authority's mainstream home to school transport policy.

## Part 6: Continued

Does your child have any mobility issues which affect accessing transport?

Yes  No

If 'yes', please detail below:

In your opinion, is your child able to travel on public transport safely?

Yes  No

Does your child use public transport at weekends/ out of school hours?

Yes  No

Would your child be capable of travelling to school independently, after receiving support from the Independent Travel Trainer?

Yes  No

If 'no', please detail below:

Does your child travel in a wheelchair or buggy?

Yes  No

If 'yes', is it:  a buggy  a wheelchair

If it is a wheelchair, is it:

Manual? Please state the make and model: .....

Electric? Please state the make and model: .....

If it is a buggy, is it crash tested?

Yes  No

Has the wheelchair been modified in any way since tested?

Yes  No  Don't know

If yes, please supply details:

Please note:

If your child's wheelchair or buggy is to be changed, you **must** inform School Transport before any change happens. Therefore an assessment can be made regarding vehicle suitability.

## Part 6: Pupil Health, Medical and Mobility Needs

This section asks you to inform us of your child's Special Educational Needs. Has your child been diagnosed with any of the following?

Emotional/behavioural/social difficulties  Yes  No

Learning difficulties?  Yes  No

If yes, can you please supply information:

Speech, Language or communication difficulties?  Yes  No

If yes, can you please supply information:

Physical and neurological difficulties?  Yes  No

If yes, can you please supply information:

Visual Impairment?  Yes  No

If yes, can you please supply information:

Hearing Impairment?  Yes  No

If yes, can you please supply information:

Diabetes?  Yes  No

If yes, is the diabetes controlled?  Yes  No

Breathing problems?  Yes  No

If yes, can you please supply information:

Epilepsy?  Yes  No

If yes, please supply details of your child's epilepsy and what seizures they have:

If your child has epilepsy do they need recovery medicine?  Yes  No

If they need require recovery medicine, do you give consent to the School Transport Team to have access to their care plan?  Yes  No

Allergies?  Yes  No

If yes, what allergies does your child have and how is it managed?

Does your child carry an epi-pen?  Yes  No

**Due to health and safety regulations all passengers must wear a seat belt when travelling in a vehicle**

Does your child require a harness when travelling in a vehicle?

Yes  No

If yes, what type of harness:

.....

Does your child require a car seat/high back booster or booster cushion when travelling in a vehicle?

Yes  No

If 'yes', what is their:

Weight (kg): ..... Height (cm): .....

Please supply details of any other seating requirements:

## Medication

Does your child need to carry medicines between home and school?

Yes  No

If so, please give details below:

**NB: Any medication must be stored within the provided medication bag (which should clearly state the child's name). The medication bag should be handed to the passenger assistant who will hand the bag over to school.**

Does your child have a medical condition, which may mean that they require medical treatment when they are travelling in a vehicle?

Yes  No

If, yes please provide details below:

If there is any additional information regarding your child's health, medical and mobility needs can you please list here. You can submit a supplementary sheet or sheets if necessary.

## Part 7: Declaration of Parent/Carer Declaration

**Please note: all applications must be signed. Any unsigned forms will be returned.**

I declare that the information provided on this form is correct at the time of submission. If any of the circumstances change, I agree to notify the council immediately. If the council agrees to provide travel assistance for my child, I understand that:

- Following this assessment, the council will decide what form of travel assistance will be offered
- Any travel assistance agreed will be reviewed at least once every year
- Any change of circumstance (e.g. change of address) that may affect my child's present entitlement to travel assistance, will result in a review of the type of transport assistance provided
- The council may review the travel assistance provided if the behaviour of my child presents a health and safety risk to themselves, or others, while travelling on the transport
- The council is trying to make the best use of limited resources and therefore will apply a principle of lowest cost option for any child receiving transport assistance. The lowest cost option may vary depending on individual family circumstance and may be one of the following: a mileage allowance for parents/carers to transport their child using their own vehicle; a bus pass; mini-bus transport arranged by the Local Authority transporting a number of children; taxi arranged by the Local Authority.

**Parent name (please print):** .....

**Signed:** ..... **Date:** .....

### Data Privacy:

The information provided on this form will be processed in accordance with the Local Authority's Home to School Transport Privacy Notice. Information will be treated as confidential and will be used only for the purpose of assessing your child's eligibility for free school transport, in accordance with the Education and Inspections Act (2006).

The Privacy Notice and data protection legislation puts in certain safeguards regarding the use of personal data by organisations including the Department of Education (DfE), local authorities, police and HM Revenue and Customs. The data protection legislation gives rights to those individuals whose data is held. These include:

- The right to request access to the data that is being held by contacting the Council Data Protection Officer - [dataprotection@sthelens.gov.uk](mailto:dataprotection@sthelens.gov.uk)
- The right to request the reason why the data is being held and why it is being used
- The right to request data to be removed (although without the information, the Home to School Transport Application cannot be processed)
- The right to request the Local Authority to correct or amend any incorrect information
- The right to know who the data may be shared with
- The right to know how long the data can be held before it is destroyed.

A copy of the full privacy notice is available on the School Transport web page. By signing this declaration, you are declaring that you have read and understood the terms of the notice.

If you have any concerns how the Local Authority is handling your data, you can contact:

Information Commissioners Office, Information Commissioner, Wycliffe House, Water Lane, Wilmslow SK9 5AF.



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### Contact Centre

Wesley House, Corporation Street, St Helens WA10 1HF

**Tel:** 01744 676789 • **Minicom:** 01744 671671

→ [www.sthelens.gov.uk/contactus](http://www.sthelens.gov.uk/contactus)

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