



POST 16 TRAVEL SCHEME APPLICATION FORM FOR 2015/16

Subject to eligibility, the completed form must be returned by 29th May 2015 to GUARANTEE a seat

PAYMENT OPTIONS

Year

Termly

(6 Half Terms)

DETAILS OF STUDENT APPLYING

Please tick appropriate box

College (out of county only)

Mainstream

SEN

SURNAME _____

DATE OF BIRTH

___/___/___

FORENAME(S) _____

TEL. NO. _____

ADDRESS _____

POSTCODE _____

NAME OF SCHOOL/ESTABLISHMENT _____

Campus Address & Post Code if applicable _____

Course title if applicable _____

Subjects to be studied and Qualification level if applicable _____
(Please be as specific as possible)

HAVE YOU PREVIOUSLY PURCHASED TRANSPORT FROM NORTHAMPTONSHIRE COUNTY COUNCIL?

YES

CUSTOMER NUMBER
(see previous invoice)

NO

ARE YOU APPLYING FOR FINANCIAL SUPPORT? (Please tick)

YES

NO

- To apply for financial support, please check your eligibility in accordance with the "Travel Scheme for Post 16 Students 2015-16 Guidance Notes". It is essential that you enclose documentary evidence to support your application. No financial support will be considered without this evidence. When sending your Tax Credit Awards for 2015/16, please ensure you enclose the FULL original document.

ARE YOU IN RECEIPT OF FREE SCHOOL MEALS? If you are, you may qualify for financial assistance

(Please tick)

YES

NO

The information you supply may be verified with the School or the Free Schools Meals Team. To apply for Free School Meals please visit their website at www.northamptonshire.gov.uk

Parents and students are asked to read and adhere to the "Code of Conduct" which can be found at www.northamptonshire.gov.uk along with the "Post 16 Transport Policy".

I accept the "Code of Conduct" _____ Date _____

Signature of Student/Parent/Guardian/Carer

Print name _____

FOR OFFICE USE ONLY

Date received 50% Reduction Evidence Seen Free

Cont. No. B. Point Pass No. CMF Query No. AF _____

Customer No. _____

DETAILS OF PARENT/GUARDIAN/CARER

TITLE MR/MRS/MISS/MS FORENAME(S) _____

SURNAME _____

ADDRESS _____

TOWN _____ COUNTY _____

POSTCODE _____ TEL. NO. _____

MOBILE No. _____

EMAIL ADDRESS _____
(please write clearly)

SIGNATURE _____ DATE _____

PRINT NAME _____

PAYMENT DETAILS

If your application is successful, you will either receive an invoice prior to the start of the academic year for the full cost of £600, if this option has been chosen, or every school half term for £100 where the termly payment option has been selected.

Details of where to direct your queries in relation to the charge and methods of payment will be shown on your invoice.

PLEASE NOTE THERE IS NO REDUCTION FOR MORNINGS/AFTERNOONS ONLY

When you have completed the form please post it to: -

Northamptonshire Highways, Post 16 Travel Scheme, Floor 4, Riverside House, Riverside Way, Bedford Road, Northampton, NN1 5NX

If you wish to email your completed application form please use an electronic signature to sign the declaration overleaf then email it to mainstreamtransport@kierwsp.co.uk for College (out of county only) & Mainstream and to SENtransport@kierwsp.co.uk for SEN.

DETAILS OF PERSON PAYING FOR THE TRANSPORT IF DIFFERENT FROM ABOVE

TITLE MR/MRS/MISS/MS FORENAME(S) _____

SURNAME _____

ADDRESS _____

TOWN _____ COUNTY _____

POST CODE _____ TEL. NO. _____

MOBILE No. _____

EMAIL ADDRESS _____
(please write clearly)

SIGNATURE _____ DATE _____

PRINT NAME _____

PLEASE COMPLETE EACH SECTION OF THE ABOVE FORM AS FAILURE TO DO SO WILL RESULT IN THE FORM BEING RETURNED TO YOU THUS DELAYING THE PROCESSING OF THIS APPLICATION