



Admissions	stamp	on	ly
------------	-------	----	----

Date received

Office use only:

Staff initials

Year:

ID:

- Please read the 'Policy and guidance notes' before completing this application form
- You should only complete this form if you are a resident of Tower Hamlets and you either:
  - have parental responsibility for the child you are applying for, or
  - are a student already attending or due to start sixth form/college
- If you are living in temporary accommodation outside of Tower Hamlets, you should contact your local council for travel assistance
- If you are completing this application on behalf of the family please provide your details in Section B
- Section A must be completed for all applicants. You should then complete either Section B or C, which ever is applicable
- The completed form and any supporting documentation must be sent to School Admissions, Tower Hamlets Town Hall, 160 Whitechapel Road, London E1 1BJ
- If you need further advice or information, please visit towerhamlets.gov.uk/ schooladmissions, email cme@towerhamlets.gov.uk or call us on 020 7364 5006

## **SECTION A**

## 1. Applicant details

The term 'applicant' refers to the child or young person for whom assistance is being requested. This section should be completed for all applicants.

If the child or young person has an Education, Health or Care Plan (EHCP), applications should be made directly to the SEN travel team:

Tel: 020 7364 4880

Email: SpecialEducational.Needs@towerhamlets.gov.uk

Website: www.localoffertowerhamlets.co.uk/pages/local-offer/send/travel-assistance

Does the applicant attend:

Primary school Secondary school Sixth form/college

First name:

Last name

Date of birth:

Home address:

#### Postcode:

For children under 16, this should be the permanent address where they normally live with their legal guardian. If this is different from the parent or carer's address, please explain why.

Name of current educational establishment:		
Address (if outside Tower Hamlets):		
If this is not the establishment) you are requesting travel assistance for, please provide the name an	d address h	nere:
When is the applicant due to start?		
Please note that the child or young person must be registered at the 'qualifying' school, or have date which has been confirmed in writing.	an expecte	ed start
2. Why is travel assistance being requested? (please tick those v	vhich ap	oply)
<b>Statutory walking distance:</b> child is under the age of 8 and attending a school which is beyond two miles or aged 8 or over and attending a school which is beyond three miles from home address.	Yes	No
<b>Special educational needs, disability or mobility problem:</b> child has mobility problems or health and safety issues related to their special educational needs or disability, including temporary medical conditions.	Yes	No
<b>Unsafe route:</b> the school is within walking distance but child(ren) cannot reasonably be expected to walk in safety because of the nature of the route. If a route is consisted unsafe, we will carry ou a site visit and request a safety risk assessment.		No
<b>Extended rights:</b> children entitled to Free School Meals, or whose parents are in receipt of their maximum level of Working Tax Credit/Universal Credit who meet the additional criteria as stated in guidance notes.	the Yes	No
Siblings: Do you have any other children will require travel assistance?	Yes	No
If Yes, please provide details.		
Full name: DOB:		
Full name: DOB:		
Full name: DOB:		
<b>Additional Information:</b> If there are any other reasons for applying for travel assistance, please state the school attended was chosen on grounds of religion or belief or parent has an illness or disability them from accompanying the child).		

When did you move to the above address?

Previous home address:

## 3. Supporting information

In order to help us process your application, please ensure that, where relevant, you provide as much of the following information as possible.

Reason	Explanation	Documentation required
Medical	Physical or mental health issues relating to the child/young person or any other member of the family e.g. disability	Report from a hospital specialist or other professional
Social	Issues affecting the family such as domestic violence, involvement from social services, or if there are other children attending a different school and you are a single parent	Letter from a social worker or other professional, copy of Council Tax bill or tenancy agreement, birth certificate(s) or copy of award letter showing details of child/ren mentioned on application
Employment	One or both parents/carer are working or seeking work and must be available for training or interviews etc	Letter from employer confirming the nature of employment and days and hours worked, letter from Jobcentre Plus confirming training etc
Income	Currently in receipt of benefits such as income support or Job Seekers Allowance, entitled to Free School Meals, Universal Credit	Recent tax credits award notice or JSA letter
Housing	Currently living in temporary accommodation, arranged by Tower Hamlets either in or outside the borough.	Copy of tenancy agreement, a confirmation letter from the Lettings Team

#### 4. Form of assistance

The local authority will decide on the form of travel assistance which is most suitable in line with the Children's Travel Assistance policy. School transport is only provided in exceptional circumstances. If you are requesting the provision of school transport, you must provide supporting information to show why this is the most appropriate form of assistance.

Please state which form of assistance, if any, you would prefer:

How does the child or young person currently travel to school/college?

If your application is successful, assistance will start after we have informed you of our decision or on an agreed (future) start date. We will not consider requests for backdated claims for travel assistance.

When should the travel assistance start?

Section B should be completed by parents/carers applying for travel assistance for children attending primary or secondary school.

Section C should be completed for students applying for travel assistance who are attending or will be attending sixth form/college.

# **SECTION B**

This section is to be completed for children in primary or secondary school.

# 5. Parent or carer details

National insurance number:

Parent/care	r 1						
Title:	Mr	Mrs	Ms	Miss			
First name:							
Last name:							
Relationship to	the ch	nild: Mot	her	Father	Step-parents	Other contact	
If 'other contact	i', pleas	se state i	elation	ship:			
Address (if diffe	erent to	o child's a	address	5)			
Home tel:							
Work tel:							
Email:							
Date of birth:							
National insurar	nce nu	ımber:					
Parent/care	r 2						
Title:	Mr	Mrs	Ms	Miss			
First name:							
Last name:							
Relationship to	the ch	nild: Mot	her	Father	Step-parents	Other contact	
If 'other contact	i', plea:	se state r	elation	ship:			
Address (if diffe	erent to	o child's a	address	s)			
Home tel:							
Work tel:							
Email:							
Date of birth:							

4

#### 6. School details

Travel assistance will normally only be considered when the Council is unable to offer your child a place at a suitable local school.

Please confirm if your child is on the waiting list for three of your local schools?

Yes

No

If you have already made an application and would like to add or change your preferences please state below:

Preference 1:

Preference 2:

Preference 3:

If you have not applied for your local schools, you must do so before completing this form. Please visit **towerhamlets.gov.uk/schooladmissions** for details on how to apply online.

Now please complete Part 10 - Declaration and Signature

#### **SECTION C**

To be completed for applicants currently attending or due to start at a sixth form or college.

#### 7. Course details

What is the full title of your course?

Is it a full or part time course?

Full time

Part time

Subject and qualification to be gained from the course

When will the course start?

When will the course finish?

Your email:

## 8. Other sources of funding

You **must** tell us about any other sources of funding you have.

Have you applied elsewhere for a grant?

Yes

Please tick those which apply:

Tower Hamlets & Canary Wharf Education Trust

Yes No

No

No

Sir John Cass's Foundation Grant

Yes No

Tower Hamlets Educational Maintenance Allowance (THEMA)

Yes No

School/College Hardship Fund

Yes No

16-19 Bursary (Learner Support)

Yes

Other (please specify)

#### 9. Parental income

You must provide details of the income of both parents, where applicable. Please refer to the guidance for the type of documentation required.

What are the sources of parental income? (Please tick those which apply)

Employment Yes No

DWP Benefits (Job Seekers Allowance and low income benefits, Carers and disability benefits and/or

Tax Credits and Universal Credit) Yes No

Income from Company or Private Pension Yes No

Other (please specify and provide supporting documentation)

### 10. Declaration and signature

Please read and sign the declaration below.

Please note that if the applicant is under 18 years of age, it must be signed by the parent or carer who has parental responsibility for the child or young person named on this form.

- I have read and understood the conditions under which Tower Hamlets provides travel assistance as set out in the guidance notes provided
- I consent to the information provided in this form being used for the purposes of processing this application and understand that the information may be verified with other sources for accuracy
- I declare that the information I have given is complete and accurate to the best of my knowledge and belief
- I agree to supply any further information you may ask for in respect of this application
- I am aware that I am responsible for informing the council immediately of any change of circumstances that might affect this application
- I understand that if I provide false information or do not provide complete information, I may be prosecuted and the financial assistance withdrawn. I may also be obliged to pay back the balance of any assistance provided to me

Signature:

Date:

The information you have provided on this form will be held by the London Borough of Tower Hamlets in accordance with the General Data Protection Regulation. We have a duty to protect public funds and may use the information provided to prevent & detect fraud. Your information may be shared with other council and government departments for the purposes of processing your form and prevention and detection of fraud. Your information will be kept by the Local Authority for 7 years after your entitlement to travel assistance ceases. You may withdraw your consent for the processing of your information, which will also mean the withdrawal of your application for travel assistance, at any time by contacting the Pupil Services Team within the Local Authority. You also have a right to complain, object to or access the information that is held and processed about you. Please see the Council's website for further details on contacting the Complaints and Information Team.

# Important information and checklist for all applicants

Before returning this form, please make sure you have done the following:

- Filled in all the relevant sections on this form
- Enclosed a copy of your current Council Tax bill as evidence that you are a resident of Tower Hamlets
- If necessary, enclosed any supporting evidence (for example, a letter of diagnosis from a specialist to support any medical claim)
- We will send an acknowledgment letter within 5 working days of receiving your application