



## Home to School Transport Application Form

Use this form to apply for help with travel to and from school. This is for students with special educational needs, disabilities or on medical grounds. If you require help with completing this form, please contact SEN Transport Section on 0208 708 8214 or by e-mailing [sen.transport@redbridge.gov.uk](mailto:sen.transport@redbridge.gov.uk)

Please note: We normally require **ten working** days to arrange transport once your eligibility is agreed. The Special Educational Needs & Inclusion Services will decide what form of transport assistance will be provided.

### Section 1

#### Detail's of Child

Name

Address

Date of Birth

Current School

Name and  
Of school for  
which you

transport to

address

require

Date which you require transport to commence: ...../...../.....

Days transport  
required

Monday am

Tuesday am

Wednesday am

Thursday am

Monday pm

Tuesday pm

Wednesday pm

Thursday pm



Does your child have a Statement of Special Educational Needs?  
Yes  No

**Section 2**

**Additional Information**

Please explain why you think your child needs transport to and from school and why you cannot make your own arrangements to provide this assistance. Please provide us with as much information as possible. Please continue on a separate sheet if necessary.



Please note that any transport assistance provided is at the discretion and is annually reviewed.

Are you in receipt of higher rate mobility component (HRMC) of the Disability Living Allowance (DLA) for your child?

Yes  No

### Section 3

#### Detail's of Parent/Carer

Name

Address

(if same as child  
leave blank)

Contact

Home:

Work:

Mobile:

number(s)

Emergency  
Contact

Name:

Number:

Email Address

### Section 4

#### Child's Personal Details

Your child may have special needs, such as allergies, medication or behavioural issues. Please tell us anything that you think will help make the journey safe and comfortable. If you answer any of the questions with a yes, further details will be required should transport be agreed.

Does your child require a  
wheelchair or need  
special seating?

Yes  No



Is your child able to walk to and from the vehicle on their own?

Yes  No

Does your child have communication difficulties?

Yes  No

Does your child have emotional and behaviour difficulties?

Yes  No

Does your child have physical or sensory difficulties?

Yes  No

Does your child have any medical needs e.g. requires oxygen?

Yes  No

Does your child require lifting?

Yes  No

Is your child able to travel to school on public transport even if accompanied?  
Yes  No

If you answered NO to the last question, Please give reasons why?

Are there any other special needs we need to be aware of?



**Section 5**

**Declaration**

I declare that to the best of my knowledge the information I have given is correct and complete. I will inform the Special Educational Needs & Inclusion Services if any details I have given change. I agree that if transport assistance is agreed, the information I have given may be shared with Redbridge Transport Services to provide my child with safe and appropriate transport.

**Name** ..... **Signed**..... **Date**.....

**Data Protection**

Your personal information will be held and used in accordance with the requirements of the Data Protection Act 1998. We have a duty to protect the public funds we administer and may use the information you provide for the prevention and detection of fraud. We may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

**What to do now**

Make sure you have completed all sections of the form to avoid any delays occurring and send to the following address:

SEN & Inclusion Services  
Transport Section  
Station Road Centre

