

**POST 16 TRAVEL SCHEME APPLICATION FORM FOR 20 \_\_ / \_\_**

**Subject to eligibility, GUARANTEED Seats are only available if completed forms are received by Friday 26<sup>th</sup> May**

Student Surname \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_

Student Forename(s) \_\_\_\_\_ Tel. No. \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

School/Establishment \_\_\_\_\_

Campus Address & Post Code if applicable \_\_\_\_\_

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

**DETAILS OF PERSON PAYING FOR THE TRANSPORT**

Title Mr/Mrs/Miss/Ms Forename(s) \_\_\_\_\_ Surname \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_

County \_\_\_\_\_ Post Code \_\_\_\_\_

Tel. No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

Email address (please write clearly)

Signature \_\_\_\_\_ Date \_\_\_\_\_

I have received and understood the accompanying “**Travel Scheme for Post 16 Students Guidance Notes**”

Print name \_\_\_\_\_

**HAVE YOU PREVIOUSLY PURCHASED TRANSPORT FROM NORTHAMPTONSHIRE COUNTY COUNCIL?**

YES  CUSTOMER NUMBER \_\_\_\_\_ NO   
 (this is located on any previous invoice)

Parents and students are asked to read and adhere to the “**Code of Conduct**” which can be found at [www.northamptonshire.gov.uk](http://www.northamptonshire.gov.uk) along with the “**Post 16 Transport Policy**”.

I accept the “**Code of Conduct**” \_\_\_\_\_ Date \_\_\_\_\_

Signature of Student/Parent/Legal Guardian

Print name \_\_\_\_\_

**OFFICE USE ONLY**

Receipt/Log Date	Ack. Sent	Benefit Documents	50% Reduction	N/Q Letter
Cont. No	Student ID	FSM	Free	Date
Service No	Chosen Name	DES Number	Description/Boarding Point	Pass No.
		Sec		Euclid Request Date

**DETAILS OF PARENT/LEGAL GUARDIAN (IF DIFFERENT FROM OVERLEAF)**

Title Mr/Mrs/Miss/Ms      Forename(s) \_\_\_\_\_      Surname \_\_\_\_\_

Address \_\_\_\_\_      Town \_\_\_\_\_

County \_\_\_\_\_      Post Code \_\_\_\_\_

Tel. No. \_\_\_\_\_      Mobile No. \_\_\_\_\_

Email address (please write clearly)

Signature \_\_\_\_\_      Date \_\_\_\_\_

I have received and understood the accompanying "Travel Scheme for Post 16 Students Guidance Notes"

Print name \_\_\_\_\_

**ARE YOU APPLYING FOR FINANCIAL SUPPORT? (Please tick) YES  NO**

- To apply for financial support, please check your eligibility in accordance with the accompanying "Travel Scheme for Post 16 Students Guidance Notes". It is essential that you enclose complete documentary evidence to support your application. No financial support will be considered without this evidence therefore the full cost will be applied until these documents are received and your entitlement confirmed. When sending your Tax Credit Awards for April to April relevant to the academic year, please ensure you enclose all pages of the 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](http://www.northamptonshire.gov.uk)

**If you are on low income or in receipt of free school meals, you may be entitled to bursary funding which is available from the establishment attended. Please note that this is not administered in this office**

**PAYMENT DETAILS**

If your application is successful, you will receive an invoice prior to the start of the academic year for the full cost of £600, if the yearly payment option has been chosen, or on a monthly basis over a six month period for £100 each month where the monthly payment option has been selected. **NB. Refunds will not be given if the pass is no longer required so please consider your options very carefully prior to submitting this form as you will be liable to pay the full cost even if transport is no longer required**

**Details of where to direct your queries in relation to the charge and methods of payment will be shown on the reverse of your invoice. Regrettably, we are unable to process or check any payments in this office.**

**PAYMENT OPTIONS**  
(please tick required option to pay)      **Year** (1 invoice of £600)       **Monthly** (6 invoices of £100 each)

**PLEASE NOTE THAT ONLY FULL DAY PASSES ARE AVAILABLE**

**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**

Please email the completed application form to [transportapplications@kierwsp.co.uk](mailto:transportapplications@kierwsp.co.uk)

Alternatively, you may post the completed application form (please allow 5 working days for delivery) to:

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

**NB. PLEASE NOTE THAT AN ACKNOWLEDGEMENT WILL NOT BE SENT UNLESS REQUESTED WHEN SUBMITTING THIS APPLICATION FORM**