



**APPLICATION FOR STUDENTS FOR TRAVEL
 ON A SCHOOL BUS WHEN BY-PASSING A LOCAL SCHOOL**

PLEASE NOTE THE FOLLOWING:

- Parents: complete page 1 and present this application to your chosen school. It will then be sent onto the school being bypassed, and other officers if required, for comment
- Applications will be assessed on DECD's School Transport policy guidelines. Consideration will also be given to any other special family circumstances
- Following assessment, permission may be given for students to bypass under the following conditions:-
As an ineligible student – whilst there are vacant seats on the bus, and subject to annual application
As an eligible student – guaranteed a seat on the bus for the period of enrolment at the chosen school (approval is only given if specific policy criteria are met)
- Further information about criteria is at <https://www.decd.sa.gov.au/doc/school-transport-policy>. (See Eligibility to Travel and Choice of School bus travel)

Parent/Caregiver Name/s

Student's name Year level

Student's name Year level

Student's name Year level

Intended commencement date:/...../.....

Address

Postal Address (if different from above)Postcode

Telephone Home Mobile Work

Email

NEAREST LOCAL SCHOOL

CHOSEN SCHOOL

Reasons for wishing to by-pass the nearest school

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Are your children currently attending the chosen school?

YES () NO () If Yes since when?

PARENT SIGNATURE: DATE:

SCHOOL/OFFICE USE ONLY

ADVICE AND COMMENTS FROM: (Principals to clearly state their support, or otherwise, and reasons)

PRINCIPAL OF CHOSEN SCHOOL

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I have ascertained that a seat is available on the school bus for this year. YES () NO ()

SIGNATURE: DATE:

PRINCIPAL OF LOCAL SCHOOL (ie. SCHOOL THAT STUDENT SEEKS APPROVAL TO BYPASS)

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SIGNATURE: DATE:

OTHER RELEVANT INFORMATION e.g. Educational Psychologist, Doctor reports etc

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Has a separate report been attached / sent to the Education Director? YES () NO ()

SIGNATURE: DATE:

APPROVED / NOT APPROVED

Letter/Email sent:/...../..... (date)

- () Ineligible Traveller agreement form signed, completed and returned by Parent/Caregiver (Permission for Transport of Ineligible Students on a School Bus)
- () Eligible Traveller (based on specific Policy Criteria)

IN THE EVENT OF AN APPEAL - EDUCATION DIRECTOR'S COMMENT and Decision

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Letter sent to all parties:DATE:.....

SIGNATURE:DATE:.....