

SCHOOL TRANSPORT REQUEST FROM SOCIAL SERVICES

Sections 1, 2, 3 and 4 to be completed by Social Worker/Housing Officer

SECTION 1 - PUPIL'S DETAILS

Name: Date of Birth:

Address

.....

Parent/Guardian: Tel:.....

School Attended:

SECTION 2 - REVIEW ARRANGEMENTS

ATTENTION IMPORTANT INFORMATION – TRANSPORT WILL BE FUNDED BY EDUCATION FOR THE DURATION OF 28 DAYS ONLY AND THEREAFTER RESPONSIBILITY FOR PAYMENT IS PASSED TO HOMELESS TEAM BUDGET

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 Review date(s)/arrangements should be detailed above and any change advised to The Transport Team as soon as possible.

SECTION 3

Escort needed	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Child in wheelchair	<input type="checkbox"/>
Child to travel alone	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Hackney cab required	<input type="checkbox"/>
Car seat required	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Buggy	<input type="checkbox"/>

Any other relevant information:

SECTION 4

Request approved by: Date:
 (Social Worker/Housing Officer*) *Delete as appropriate

Tel:

EDUCATION OFFICE USE ONLY

Contract No:

Duration of transport:

Completed forms should be sent to The Transport Team, Transactional Finance, Shared
 Services, Suite S4, Southbank Marina, Kirkintilloch, G66 1XT
 Form can also be faxed to 0141 574 5580