

APPLICATION FOR TRANSPORT – **POST-16 STUDENTS (SCHOOL OR COLLEGE**)

Post-16 students from ‘low income’ families can apply for support with transport if their parents/carers can provide evidence that they are in receipt of one of the benefits (as listed on the Post-16 Transport Low Income Families Criteria sheet). Evidence should be relevant to the 2025/26 financial year. If you consider yourself eligible for free transport on ‘low income’ grounds and have been offered a place on a full-time course (a minimum of 17 hours per week attendance) please complete the form below. Before doing so you are advised to read the Post-16 Transport Policy Statement 2025/2026 which is available on the Council’s website.

STUDENT DETAILS

SURNAME DATE OF BIRTH

FORENAME(S)

HOME ADDRESS

POST CODE TEL NO

E-MAIL ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF SIXTH FORM OR COLLEGE to be attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COURSE TITLE/SUBJECTS TAKEN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­\_\_

If this is not your nearest or catchment school, are you attending due to subject choice? Yes/No

Full Time (17 hours or more per week) ¨

Part Time (less than 17 hours per week) ¨

Have you applied for a Post-16 bursary? Yes/No

Do you know the value of the bursary? £\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE FROM WHICH TRANSPORT IS REQUIRED \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Completed application forms must be received by 18 July to ensure transport is in place (where applicable) by the start of the academic year).

ARE YOU ELIGIBLE FOR FREE SCHOOL MEALS YES ¨

OR, LOW INCOME EVIDENCE ENCLOSED (photocopies/scans only) YES ¨

SIGNATURE OF PARENT/CARER DATE

PLEASE PRINT NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return via email to: [transports@cumberland.gov.uk](mailto:transports@cumberland.gov.uk)

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| --- | --- | --- | --- | --- | --- | --- | --- |
| FOR OFFICE USE ONLY | | | | | | | |
| Catchment  School | Nearest College | Assessment Outcome | Date for Reassessment | | Reason | Route Number(s) | Other |
|  |  |  |  | |  |  |  |
| ASSESSED BY: | | | | DATE: | | | |