

**FORM A (T2023-24)**

**Using your data for Travel Support**

Dear Parent /Carer

Please read carefully the following information as it is important that you know what we do with the information that you provide.

**What do we need the information for?**

Sheffield City Council have sent you this Request for Travel Support to complete so we can consider eligibility to provide the most appropriate travel support to meet your child’s needs.

**What we will do with the information**

Once we receive this information it will be considered at the Travel Panel to enable a decision to be made. The information will then be securely stored for a period of one year, following which it will be appropriately disposed of.

**Who will see the information?**

The information that you provide will **only** be seen by relevant Sheffield City Council staff linked to the travel and transport teams.

The information that you have provided is covered by the Data Protection Act 2018.

**How long will we keep the information?**

The council will only retain the information about your child for a period of 1 year following receipt of your Request for Travel Support.

**Who do I contact if I have any questions?**

If you have any concerns or wish to have further information regarding how we process and share data please do not hesitate to contact us on 0114 2053542 or email: indetravel@sheffield.gov.uk.

**What are your rights?**

You have rights under data protection law. For further details about your rights, the contact details of our Data Protection Officer and your right to make a complaint please see our data protection webpage

**http://www.sheffield.gov.uk/content/sheffield/home/your-city-council/data-protection.html**

If you don’t have access to the internet, please contact us and we will be able to provide paper versions of the information you require.

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| **Name of child** |  |
| **Parent / Carer Name** |  |
| **Date** |  |

Please complete all parts of thisform so that your application can be considered. Please provide as much detailed information as possible. Please return it to **Travel Assessment & Training Team, Moorfoot Building, Level 7 West Wing, Sheffield S1 4PL.**

**Your Request for Travel Support cannot be progressed without your permission to use this Data. Please see Parent/carer Data Consent below.**

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| **Parent / Carer Data Consent** | **Please Sign** |
| **I give my consent for the data in the Request for Travel Support form to be used to assist in the eligibility when considering travel support for my young person:**  |  |

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| **Reasons For Completing This Form:**  | **Please Tick Appropriate Box:**  |
| **New Application:** |  |
| **You Have Been Asked to Reapply for Support:**  |  |
| **Your Young Person is Changing Sch/College Site:**  |  |
| **Your Young Persons Needs****Have Changed:**  |  |
| **Change Of Address:**  |  |

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| **If your young person is awarded travel support as a result of the application, what is the confirmed start date?** ***Please note we do not provide travel support for transition visits.***  |  |

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| **FORM A****Education & Skills - Peoples Services****Post 16 Request for Travel Support Application Form** |

**If you are offered transport as your young person’s travel support option, you will be required to pay a contribution amount depending on the days attending during the week. Payment details will be sent to you in your decision letter. An Invoice will be sent once transport and school / college has verified attendance.**

When transferring into Post 16 Education the travel support needs of all young people with learning difficulties or disabilities are reviewed.

**Please explain why your young person could not get themselves to school/college. If they are unable, please explain why you or a family member are unable to support your young person to their Post 16 Educational Site.** (*There is no automatic entitlement to free home to school or college transport once a student is over 16 years and beyond statutory school age).*

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| **Section One** |
| **Pupil’s name:** | **D.O.B. \_\_\_\_ / \_\_\_\_ / \_\_\_\_** |
| **Male/Female/Prefer not to say/Prefer to self-describe:**  |  |
| **Parent/Carer’s name:** |
| **Student’s home address:** |
| **Postcode:** | **Email:** |
| **Contact Tel. No:** | **Mobile:** |
| **Current Post 16 School/college/provision:** |  |
| **Section Two: Intended Educational Provision**  |
| **Post 16 School** 🞎**City College Campus** [ ] **Peaks College Campus**[ ] **Hillsborough College Campus**[ ] **Freeman College**[ ] **Longley College**[ ]  | **Sheaf** 🞎**Other- Please give details** |

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| **Section Three: The Young Persons Information**  |

Does the young person have an EHC Plan? Yes [ ]  No [ ]

Within the EHC Plan is there an outcome for Independent Travel?

 Yes No [ ]

Does the young person have a travel disability pass issued by the SYPTE (South Yorkshire Passenger Transport Executive)?

 Yes [ ]  No [ ]

How does the young person currently get to and from their place of education?

Minibus [ ]  Independent Travel Training [ ]

Taxi [ ]  Life Skills Training [ ]

Walking [ ]  Self Travel with support [ ]

Cycling [ ]  Parents take in car [ ]

Get Going [ ]  Public bus/tram [ ]

**If this request is based on medical grounds, we will require up to date medical information.** (Use additional sheets as necessary).

Is Medical Evidence Provided to Support This Application Form:

 Yes No

Has the young person had any experience of traveling on public transport, with or without adult support or travelling themselves?

 Yes [ ]  No [ ]

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| Please give further information: |

Does the young person go out independently, with friends or accompanied by an adult? Is this in the local area or elsewhere?

Yes [ ]  No [ ]

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| Please give further information: |

Does the young person have experience of using money e.g., going to the shops, paying on public transport etc?

Yes [ ]  No [ ]

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| Please give further information: |

**If the young person is eligible for travel support -** Would you be interested in Sheffield City Council paying you mileage for taking your young person between home and school/college? This would be 45p per mile, and could be for 1 or 2 return journeys per school day depending on individual circumstances.

Yes [ ]                                    No   [ ]

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| **Signature: Date:****Print Name:** **Relationship to child / young person:**  |