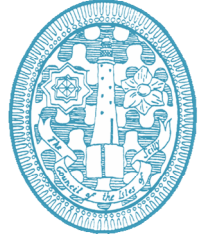


Home to School Travel Allowance
Council of the Isles of Scilly
The Town Hall
St Mary's
Isles of Scilly
TR21 0LW

Council of the Isles of Scilly



Home to School Travel Allowance Application form

Please complete this form and return it to the address shown above. Please note, if the form is not fully completed it will be returned to you and this may delay your application.

Please fill in using block capitals

Name of child to who the application refers

Date of birth of child

Name and site of school being attended

Home Address

.....

Name of parent or guardian/carer

Contact telephone number

Does your child have any siblings at school? If so what are their names and dates of birth?

Name **Date of birth**

Name **Date of birth**

Dates you wish to apply for the Transport allowance:

Signature of parent/carer requesting travel allowance

Date

Data Protection Act: The information which you provide on this form will be help by the Council of the Isles of Scilly and will be used for the purpose of assessing eligibility related to the home to school travel allowance. Where appropriate, the information may also be used by the Council for the purposes of providing other services. This information will be help securely and will not be disclosed to any one other than those stated above, without your permission.

For Council use only:

Is the pupil eligible Yes No

Date eligible from /

Review Date / / Application reviewed by;

HSTA; 2009