

SCHOOL TRANSPORT

APPLICATION FOR A SPARE SEAT SCHEME SEAT

In order to apply for a Spare Seat on existing school transport for your child, please complete the details below. Before doing so you must read the Spare Seat Scheme notes and confirm below that you agree to abide by the terms and conditions.

DETAILS OF PUPIL		
SURNAME		DATE OF BIRTH
FORENAME(S)		
HOME ADDRESS		
POST CODE		TEL NO
SCHOOL TO BE ATTENDED _		
DATE FROM WHICH TRANSP	ORT IS REQUESTED	
PREFERRED BOARDING POI	NT	
school, I confirm that I have rea Spare Seat Scheme by ticking t Where appropriate, I agree to m	ad and agree to abide by all the the box. nake such regular payments as	e travel for the above named pupil to and from e conditions applicable to Cumberland Council's may be required to Cumberland Council at such that will result in the withdrawal of transport.
SIGNATURE OF PARENT/CARER		DATE
Please return this form to:	School Transport, Childre Cumbria House Cumberland Council 117 Botchergate Carlisle CA1 1RD	ens Services
	FOR OFFICE USE O	DNLY
Route Number:		
Offer Seat:		Waiting List:
Assessed By:		Date: