

# Intensive English Unit (IEU) Transport Assistance Request Form

This IEU Transport Assistance Request Form must be submitted for all students requesting transport assistance. This form is also required to be completed for students requesting continual assistance for a new school year or to change their home address. If a student is eligible but there is no available transport they may be placed on a wait list. **Allow up to 5 working days from receipt of application by the Department of Infrastructure, Planning and Logistics for reply back to your IEU school.**

Please tick the appropriate box below

**New Request**

**Continuing Request**

**Change Address**

## Parent / Carer to complete

<b>Student Details</b>		Date of birth: ____/____/____
Surname: _____		Gender:    Male    Female
Given name: _____		
Country of Birth: _____	Nationality: _____	Language/s spoken: _____
<i>*Please provide new address if this request is for change of address*</i>		
Student's address: _____		
<b>Parent / Carer Details</b>		Mother      Father      Carer
Surname: _____		
Given name: _____		Language/s spoken: _____
E-mail address: _____		
Home phone number: _____	Mobile number: _____	
<p>I (parent/carer) _____ understand that if my child attends transition or is deemed not competent to catch a bus by themselves, that I must accompany my child to and from the designated bus stop. If I am not available to collect my child from their designated bus stop my child will be brought back to the school at the end of the scheduled run. If this occurs, I will be required to collect my child from the school. I also understand that I must ensure my child arrives at the designated bus stop at least 5 minutes early.</p> <p>I have read and understand the "Transport for Students to Intensive English Unit Schools Guideline" and the "Code of Conduct for School Bus Travel".</p> <p>Signed (parent/carer): _____ Date: ____/____/____</p> <p><b>Please note: Incomplete forms cannot be processed.</b></p> <p><b>For enquiries or to submit completed forms email: <a href="mailto:public.transport@nt.gov.au">public.transport@nt.gov.au</a> or call 8924 7297</b></p>		

**Intensive English Unit (IEU) Transport Assistance Request Form**

**School to complete**

Student Number: \_\_\_\_\_ Name of School: \_\_\_\_\_

Contact person: \_\_\_\_\_ Contact number: \_\_\_\_\_

E-mail address: \_\_\_\_\_ School start/finish time: \_\_\_\_\_

Requested start date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Anticipated end date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Year of schooling (please circle relevant year)**

Transition    Year 1    Year 2    Year 3    Year 4    Year 5    Year 6    Year 7    Year 8    Year 9

**Identification tag**

**Bus 1 Yellow Tag** - Palmerston     **Bus 2 Pink Tag** - City     **Bus 3 Orange Tag** - Northern Suburbs

**Principal endorsement must be provided**

Principal name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signature: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Comments: \_\_\_\_\_

**Bus operator to complete**

**Morning pick up details**

Location or bus stop number	Bus Number	Time	Name of school

**Afternoon drop off details**

Name of school	Bus Number	Time	Location or bus stop number

Recommended                      Not Recommended

Comment: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Public Transport to complete**

Approved                      Not Approved

Comment if not approved: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_