Intensive English Unit (IEU) 2023 Transport Assistance Request Form

This form must be submitted for all Intensive English Unit (IEU) students requesting transport assistance, continued 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 waitlist.

Allow up to 5 working days from receipt of application by the Department of Infrastructure, Planning and Logistics to reply back to your IEU school. Your school principal or school delegate will advise on the outcome of this application. **Please note:** Incomplete forms cannot be processed.

For enquiries or to submit completed forms email public.transport@nt.gov.au or call 8924 7843.

Please tick the appropriate box below					
☐ New Request	☐ Continuing Request	☐ Change Address			
Student Details					
Surname:		Date of birth: / /			
Given name:		Gender: ☐ Male ☐ Female			
Country of Birth:	Nationality:	Language/s spoken:			
Please provide new address if this request is for change of address: Student's address:					
Parent Details					
Surname:		☐ Mother ☐ Father ☐ Other *			
Given name:		Language/s spoken:			
E-mail address:					
Home phone number:		Mobile number:			
I (parent) 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. I have read and understand the Guidelines for Transport for Intensive English Unit Students and the Code of Conduct for School Bus Travel.					
Signed (narget).		Date: / /			

*A person who has parental responsibility for the child, including a person who is regarded as a parent of the child under Aboriginal customary law or Aboriginal tradition.



School to complete					
Student Number:		Name of School:			
Contact person:		Contact Number:			
E-mail address:		School start/finish times:			
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□					
Principal endorsement must be provided					
Principal name:		Date: / /			
Signature:		E-mail address:			
Bus operator to complete					
N	orning pic	k up details			
Location or bus stop number	Bus No.	Time	Name of school		
Afternoon drop off details					
Name of school	Bus No.	Time	Location or bus stop number		
☐ Recommended ☐ Not recommended Start date: / /					
Comment:					
Name: Signature		:	Date: / /		
Public Transport to complete					
☐ Approved ☐ Not approved Start date: / /					
Comment:					
Name:	_ Signature:	·	Date: / /		