Form 2: Conveyance Allowance application - Private Bus travel only

Year		Term		PLEASE ENSURE ALL PAGES ARE COMPLETED AND SIGNED

If there are more than three students claiming from this home residence, please complete another Form 2 and attach together.

Please complete Form 5 for Multi-mode conveyance allowance: when a student uses more than one mode of transport (e.g. private bus and public transport) for a journey between home and school. The distance travelled must be 4.8km or more for each leg of the journey.

APPLICANT DETAILS

RESIDENTIAL STREET ADDRESS

Unit #		Street #		Address					
Town/Suburb			State		Postcode				
Exact distance (in km) from home to school by the shortest practicable route					km				

PARENT/GUARDIAN DETAILS

First Name		Surname		Telephone	
First Name		Surname		Telephone	
Email					

TRAVELLER DETAILS

Student one

First Name		Surname		Date of birth		Travel start date	
School enrolled				Year level			
VSN				FTE (student must attend 3 days i.e. FTE 0.6 or more):			

Student claiming (please use **X** to highlight)

To/from school	☐	Off campus only	☐	To/From School and off campus	☐

Student two

First Name		Surname		Date of birth		Travel start date	
School enrolled				Year level			
VSN				FTE (student must attend 3 days i.e. FTE 0.6 or more):			

Student claiming (please use **X** to highlight)

To/from school	☐	Off campus only	☐	To/From School and off campus	☐

Student three

First Name		Surname		Date of birth		Travel start date	
School enrolled				Year level			
VSN				FTE (student must attend 3 days i.e. FTE 0.6 or more):			

Student claiming (please use **X** to highlight)

To/from school	☐	Off campus only	☐	To/From School and off campus	☐

Eligibility

An application on behalf of a student may be submitted if the student is:

- a Victorian resident.
- school aged and enrolled (3) three or more days per week at a school; and
- attending a school/campus located outside the Melbourne metropolitan conveyance boundary

A student who meets the above requirements may be eligible if they:

- attend their nearest or designated neighbourhood government school/campus appropriate to their year level, at which admission is permissible, or
- attend their nearest appropriate non-government school/campus appropriate to their year level, at which admission is permissible, and
- reside 4.8km or more by the shortest practicable route from the campus attended

Note: Eligibility is assessed when the School completes your child's application on the Student Conveyance Allowance System (SCAS). If approved, the allowance payable is based on the one-way distance to make the journey to and from school. For further information regarding the Conveyance Allowance Program see: https://www2.education.vic.gov.au/pal/conveyance-allowance/policy?Redirect=1

***Multi-mode conveyance allowances**

Multi-mode conveyance allowance applies when a student uses more than one mode of transport (e.g. private bus and public transport) for a journey between home and school.

Refer to Form 5

OFFICE USE ONLY					
Date Form Submitted		Form Signed - Yes/No – if no, return to Parent/Guardian for signature			
Parent/Guardian signed?		Date entered/assessed on SCAS		Eligible on SCAS - Y/N?	
Have any of these students been granted eligibility on the basis of an exemption? If yes, specify exemption from policy e.g. lack of available spaces at nearest school/s, Special Case Panel Approval. Attach proof for this application e.g. Letter(s) confirming refused entry from all nearer schools. The letter(s) should be dated prior to the commencement date of the student at the school applying for the conveyance allowance.					
Student one					
Student two					
Student three					
Note: Students not attending their nearest school/campus may qualify for a conveyance allowance in some circumstances only. Sibling rights do not apply in any of these circumstances. Further information regarding these circumstances can be found in the Conveyance Allowance Program policy available online at: https://www2.education.vic.gov.au/pal/conveyance-allowance/guidance or by contacting your school.					

OFFICE USE ONLY

School SCAS Coordinator Name (please print): _____

School Signature – Principal / Delegate signature: _____

Date _____

PARENT/GUARDIAN TO COMPLETE:

I certify that:

1. All the above details are true and correct to my knowledge.
2. I will notify the principal/delegate in writing within 7 days of any change of address or school.
3. The school will use personal information I have provided such as my address, child's enrolment details to assess and confirm their eligibility for the Conveyance Allowance Program using the Student Conveyance Allowance System (SCAS).
4. I consent to release this information to Department of Education (DE) representatives to assist with assessing my application on SCAS.
5. I understand the conveyance allowance is for the student/s named on the application form/s and cannot be withheld by the school in lieu of fees or late payments.
6. I understand my signed consent is required with this application form for the school to keep the conveyance allowance as a contribution towards privately procured transport services to and from school only (*please complete/sign consent below*).

Parent/guardian name (please print) _____

Parent/guardian signature _____

Date _____

PARENT/GUARDIAN CONSENT FOR SCHOOL TO WITHHOLD CONVEYANCE ALLOWANCE:

I consent that:

1. The conveyance allowance payable to the student/s named on this application form will be withheld by the school as a contribution towards privately procured transport services to and from school only.
2. I understand there may be additional costs incurred which the school may request that I cover.
3. I understand the conveyance allowance cannot be withheld or contribute towards procured bus services for school excursions.
4. I will notify the principal/delegate in writing if I wish to withdraw my consent to withhold my child's conveyance payments.
5. I understand withdrawal of my consent may not be effective until the next term claim period.

Parent/guardian name (please print) _____

Parent/guardian signature _____

Date _____