

COMMISSIONING, PROCUREMENT & CONTRACT MANAGEMENT TEAM

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 TRANSPORT IS REQUESTED _____

PREFERRED BOARDING POINT _____

In consideration of the Council providing Spare Seat Scheme travel for the above named pupil to and from school, I confirm that I have read and agree to abide by all the conditions applicable to Cumbria County Council's Spare Seat Scheme by ticking the box.

Where appropriate, I agree to make such regular payments as may be required to the County Council at such rates as the Council may direct. Failure to make such payments will result in the withdrawal of transport.

SIGNATURE OF PARENT/CARER _____ **DATE** _____

Please return this form to: CP & CM Team
Cumbria House
Cumbria County Council
107-117 Botchergate
Carlisle
CA1 1RD

FOR OFFICE USE ONLY

Route Number:

Offer Seat:

Waiting List:

Assessed By:

Date: