

# Form 1: Conveyance Allowance application - Private Car travel only

Year	2024	Term PLEASE ENSURE ALL PAGES ARE COMPLETED AND SIGNED												
Note: Wh	If there are more than three students claiming from this home residence, please complete another Form 1 and attach together.  Note: Where there is more than one student in a vehicle, there are two rates claimable: 'furthermost' distance rate and 'additional' rate. Only one student can claim the 'furthermost' distance rate. Any other students are identified as 'additional' students.													
<b>Please complete Form 5</b> for Multi-mode conveyance allowance: when a student uses more than one mode of transport (e.g. private car and publi transport) for a journey between home and school. The distance travelled must be 4.8km or more for each leg of the journey.						nd public								
APPLICANT DETAILS														
		RESIDENTIAL STREET ADDRESS												
Unit #		Street # Address												
Town/Suburb State					State		Postc			ode				
Exact dis	stance (in	km) from ho	ome to s	choo	l by the	shortest pra	cticable ro	oute	e km					
PARENT/GUARDIAN DETAILS														
First Nan		Surnan			ne			Т		Telephone	elephone			
First Nan	ne				Surname				Те		Telephone	lephone		
Email														
TRAVELLER DETAILS														
Student	Student one													
First Name				Surname					Date of birth			Travel star	rt 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 campus			nd off		
Student two														
First Nar	ne	S			ırname				Date of birth			Travel start date		
School e	nrolled	ed						Year level						
VSN						FTE (student must attend 3 days i.e. FTE 0.6 or more):								
Student	claiming	(please use X	to highlig	ght)							,			
To/from school Off campus			ipus only			To/From S campus			School and off					
Student	three													
First Name Surname				Date of			birth		Travel start date					
School e	School enrolled						Year level							
VSN									FTE (student must attend 3 days i.e. FTE 0.6 or more):					
Student	claiming	(please use <b>X</b>	to highli	ght)										
To/from	school				Off campus only						To/From School and o			
										campus				

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#### 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: <a href="https://www2.education.vic.gov.au/pal/conveyance-allowance/policy?Redirect=1">https://www2.education.vic.gov.au/pal/conveyance-allowance/policy?Redirect=1</a>

### \*Multi-mode conveyance allowances

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

Refer to Form 5

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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 availab 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.							sed entry from all		
Student one									
Student two									
Student three									
<b>Note:</b> 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	<u>'</u>								
School SCAS Coordinator Name (please print):									
School Signature – Principal / Delegate signature:									
Date									

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# 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 (*if you agree to give consent, 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

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