

Conveyance Allowance Application Private Bus Travel



Student Information - (to be completed by parent)

Student Name		Date of Birth	
Residential Street Address			
Suburb		Postcode	
Parent Name		Mobile	
Distance from place of residence to school for which conveyance allowance is to apply (kms) <i>To be eligible, students must reside 4.8km or more by the shortest practicable route from the campus attended</i>			kms
<i>Note: the distance stated above will be independently verified using SCAS</i>			

School for which Conveyance Allowance is to apply

School Name	Padua College	School Number	501
School Attended	Nearest Government School	☐	
	Next Nearest Government School	☐	
	Nearest Denominational School	☒	
	Nearest Multi / Inter Denominational Christian School	☐	
	Nearest Non-Denominational School	☐	
Date student is to commence travel			
Campus student attending: Please indicate relevant campus	Mornington - 62 Oakbank Rd, Mornington	☐	
	Rosebud - 2 Inglewood Cres, Rosebud	☐	
	Tyabb - 1585 Frankston-Flinders Rd, Tyabb	☐	

Eligibility for Allowance Declaration *(to be completed by the Parent)*

I certify that:

1. All the above details are true and correct to my knowledge.
2. The school will use personal information I have provided to assess and confirm their eligibility for the Conveyance Allowance Program using the Student Conveyance Allowance System (SCAS)
3. I consent to release this information to Department of Education (DET) representatives to assist with assessing my application on SCAS
4. I understand the conveyance allowance is for the student named on the application form and cannot be withheld by the school in lieu of fees or late payments.
5. The school will be notified in writing within 7 days of any changed circumstances for this student
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 the school only.

I consent that:

7. The conveyance allowance payable to the student named on this application form will be withheld by the school as a contribution towards privately procured transport services to and from school only.

Parent Name:

Date:

Parent Signature:

Conveyance allowance payments are subject to annual audit and must adhere to the eligibility criteria as stipulated by the Department of Education and Early Childhood Development. Contact the school or visit <https://www2.education.vic.gov.au/pal/conveyance-allowance/policy>

OFFICE USE ONLY:

Verification			
Distance Verified on SCAS	kms	Travel Mode:	☒ Private
Application entered on SCAS and MAZE (initials & date)			
School Signature: (Principal/Delegate)		Bus Coordinator Signature:	

Department of Education and Early Childhood Development collects personal information for the purposes of assessing eligibility for receipt of a conveyance allowance. Personal information will not be used for any other purposes and will not be disclosed to any other organisation/body. The department protects paper records in secure storage and computerised records are protected through access and authorisation controls. DEECD takes all reasonable technical and organisational precautions to prevent the loss, misuse or alteration of collected personal information. You are able to request access to the personal information that we hold about you and to request that it be corrected. Please contact your school directly. The Department respects individuals' privacy.