



## APPLICATION FORM FOR SCHOOL TRANSPORT FOR NEW PUPILS (School Year 2013/2014)

This Form should only be completed for children who are applying for Primary or Post Primary school transport **for the first time**

Children who availed of school transport in the last school year are already on the Bus Éireann Ticketing System and should **NOT** be included on this Application Form **unless they are moving from Primary to Post Primary school**

Parent/Guardian Name: \_\_\_\_\_ (Please complete in BLOCK CAPITALS)  
 Address: \_\_\_\_\_

Bus Éireann **Family ID NUMBER** (if known - this number may be known to existing families as it is shown on siblings ticket): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ EMAIL: \_\_\_\_\_

I wish to apply for school transport for the following child/ren who will be attending school/s as follows:-

CHILD'S NAME	DATE OF BIRTH	CHILD'S PPS NUMBER	Primary or Post Primary	SCHOOL NAME & ADDRESS	Roll Number	Class Year (Primary 1 to 8* or Post Primary 1 to 8)

\*Note: Primary Class Year Definition: Junior Infants = 1, Senior Infants = 2, 1st Class = 3 up to 6th Class = 8

In general, school transport eligibility is determined by the distance a pupil resides from his/her nearest school. However, if the school of enrolment was chosen for reasons of language and/or ethos please select:  Language  Ethos

**THIS FORM SHOULD BE COMPLETED ONLINE OR DOWNLOADED AND RETURNED TO YOUR LOCAL BUS ÉIREANN SCHOOL TRANSPORT OFFICE BEFORE THE LAST FRIDAY IN APRIL**

I have read and accept the terms of the Primary School Transport Scheme and/or Post Primary School Transport Scheme as it applies to the above child/ren  Tick box

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

**For Office Use Only:** Eligible: [ ] Concessionary: [ ] Distance: [ ] Route : [ ] Pick-up Point [ ]