BUS PASS SCHEME FOR NON ENTITLED STUDENTS APPLICATION FORM FOR 20 __/ __

GUARANTEED Seats are only available if completed forms are received by the 3rd Friday in May

THERE IS NO FINANCIAL ASSISTANCE OR REDUCTIONS AVAILABLE TO NON ENTITLED STUDENTS

| Student Surna | ame | | | | |
|--|---|--|-------------------------------|---------------------|--|
| Student Forer | name(s) | | Tel. No | | |
| Address | | | | | |
| | | P | ost Code | | |
| Name of Scho | ool/Establishment | | | | |
| Parent's/Lega | al Guardian's Full Name | | | | |
| Email address (please write clea | | | | | |
| Signature | | D | ate | | |
| I have receive Notes" Print name | ed and understood the accompa | , , | eme for Non-Entitled Studer | | |
| SERVICE NU | (i.e. | ARDING POINT — Village / Street Name ase do not leave blan | | | |
| | DETAILS ARE HELD AT THE ARIFIED UPON RECEIPT OF TH | | | | |
| | PLEASE NOTE TH | AT ONLY FULL DAY I | PASSES ARE AVAILABLE | | |
| HAVE YOU P | PREVIOUSLY PURCHASED T | RANSPORT FROM N | ORTHAMPTONSHIRE COUN | TY COUNCIL? | |
| YES | CUSTOMER NUMBER (see previous invoice) | | 0 | | |
| | students are asked to read and aptonshire.gov.uk along with the | adhere to the "Code o | of Conduct" which can be four | | |
| I accept the " | Code of Conduct"Signature o | f Student/Parent/Lega | Date I Guardian | | |
| | Print name | | | | |
| OFFICE USE O | DNLY | | | | |
| Receipt/Log Date | Ack. Sent | N/Q Letter Date | | | |
| Cont. No | Student ID | DES Number | Description/Boarding Point | Pass No. | |
| Sarvica No | Chasan Nama | Soc / Bri | | Euclid Request Date | |

DETAILS OF PERSON PAYING FOR THE TRANSPORT IF DIFFERENT FROM OVERLEAF

| Title Mr/Mrs/Miss/Ms Forename(s) | Surname |
|---|---|
| Address | Town |
| County | Post Code |
| Tel. No. | Mobile No |
| Email Address (please write clearly) | |
| Signature | _ Date |
| I have received and understood the accompanying "Bus Pass Notes" Print name | Scheme for Non-Entitled Students Guidance |
| PAYMENT DETAILS | |
| If your application is successful, you will receive an invoice pric £600, if the yearly payment option has been chosen, or on a m month commencing in August, where the monthly payment optive received after the 3 rd Friday in May, and is successful, you will of your application for the appropriate cost, if the yearly payme the required period for £100 each month. NB. Refunds will no please consider your options very carefully prior to submit cost even if transport is no longer required. | nonthly basis over a six month period for £100 each tion has been selected. However, if your application is receive an invoice the month following the processing ont option has been chosen, or on a monthly basis over ot be given if the pass is no longer required so |
| Details of where to direct your queries in relation to the ch reverse of your invoice. Regrettably, we are unable to pro | |
| PAYMENT OPTIONS (please tick required option to pay) PLEASE NOTE THAT ONLY FULL D | |
| PLEASE COMPLETE EACH SECTION OF THE ABOVE THE FORM BEING RETURNED TO YOU THUS DELAYI | |

Please email the completed application form to transportapplications@kierwsp.co.uk

Alternatively, you may post the completed application form (please allow 5 working days for delivery) to:

Northamptonshire Highways Non-Entitled Travel Scheme Floor 4, Riverside House Riverside Way Bedford Road Northampton NN1 5NX

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m \underline{NB.}}$ AN ACKNOWLEDGEMENT WILL NOT BE SENT UNLESS REQUESTED WHEN SUBMITTING THE APPLICATION FORM