



Year		Term		PLEASE ENSURE ALL PAGES ARE COMPLETED AND SIGNED
<p>If there are more than three students claiming from this home residence, please complete another Form 1 and attach together.</p> <p><i>Note:</i> Where there is more than one student in a vehicle, there are two rates claimable: 'furthestmost' distance rate and 'additional' rate. Only one student can claim the 'furthestmost' distance rate. Any other students are identified as 'additional' (r)-3 6321.m</p>				

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 414 (c) e8cc667 rg21316:

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School SCAS Coordinator Name (please print):

School Signature – Principal / Delegate signature:

Date

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)

6.

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