



Application for College Bus Transport

Commencement of Bus Travel requested from / /

Family Name: _____

Student's Name: 1. _____ Year Level: _____

2. _____

3. _____

4. _____

5. _____

Home Address: _____

Family Contact Details

Parent/Carer Name: _____

Contact Phone Number: _____

Parent/Carer Name: _____

Contact Phone Number: _____

Emergency Contact Details

Contact Name: _____

Phone Number: _____

Relationship to Student: _____

If a Parent/Carer is not at the designated bus drop off location and the driver is unable to make contact with the Parent/Carer, the driver will complete the bus run and return to the drop off location. The driver will then attempt to make contact with the designated emergency person. If no contact can be established the driver will return the student to the College. The police will then be notified of the situation. This does not apply if instructions are given below to say the student may be left unattended at their bus stop.

Instructions in the event of no adult present at drop off location: _____

Please note: Any changes to the student's bus routine affected during school hours must be communicated through the College Administration on 4668 9777. Outside of school hours, please contact the Bus Driver via SMS or leaving a message on the driver's mobile. Bus Driver contact details will be communicated on acceptance of this application. Notification should always be given if your child/children are not travelling on the bus.

Additional information: _____

I, the Parent/Carer, have read and understand the Chinchilla Christian College Bus Rules and the Queensland Code of Conduct for Parent/Carer and Student Factsheets. I agree to discuss and encourage the compliance of these rules with my child/children. I agree to contact the Registrar and Fees Advisor at the College to discuss payment terms available to me for Bus Travel Fees.

I have received a copy of the: Chinchilla Christian College Bus Rules	Yes___	No___
Qld Code of Conduct Parent/Carer Factsheet	Yes___	No___
Qld Code of Conduct Student Factsheet	Yes___	No___

Name: _____

Date: _____

Signature: _____

Please complete and return this application prior to commencement of use of our bus service. Completed forms can be scanned and emailed to registrar@chinchillacc.qld.edu.au or given to Administration Staff at College Reception. Alternatively, please post to: Chinchilla Christian College PO Box 242, CHINCHILLA QLD 4413.