

Special circumstance adult student bus pass application form and guidelines

PT602-4

What is a special circumstance student bus pass?

A special circumstance adult student bus pass provides adult students who meet the eligibility criteria with discounted travel on one or more fare charging bus services between 6:00 am and 7:00 pm on school days. In certain circumstances you may be eligible for free travel.

Who can apply?

You must be:

- aged 18 or older at 1 January in the year of study
- a full-time student (600+ hours per year) enrolled at an education facility recognised by the Department of Education
- studying at a level that is no higher than is offered to any year 11 or 12 student at a senior secondary college.

AND have not had the opportunity to complete the equivalent of two years post year 10 study due to circumstances beyond your control including:

- delayed entry at the start of your school life
- interrupted education progress due to disability, illness, family circumstances, frequent changes to school, or other circumstances
- the time required to complete two equivalent years of post year 10 training and education has been extended because of disability
- late completion compared to other students in your age group due to initial overseas or interstate enrolment
- you have humanitarian entrant status.

Free travel eligibility

You may be eligible for free travel to and from school if you are the holder of a current Concession Card, or you are listed as a dependent on the card. Accepted Concession Cards are:

- Centrelink Health Care Card (HCC)
- Centrelink Pensioner Concession Card (PCC)
- Department of Veterans' Affairs (DVA) Pensioner Concession Card.

DO NOT USE THIS FORM if:

- you are enrolled in a short course or part-time education
- you have already completed two years of post year 10 study
- you are enrolled in a course level higher than year 11 or 12, or equivalent
- you are under 18 at 1 January in the year of study
- you are enrolled at an education facility not recognised by the Department of Education
- you have already been approved for free travel but your pass is lost/stolen or damaged. You will need to complete the [Replacement student bus pass for free travel application form](#).

How to apply?

Complete sections 1-6 of this application form.

Section 4 (Concession Card details) must be completed by the Concession Card holder if you are applying for free travel.

Section 7 must be completed by the Principal, Assistant Principal or Student Coordinator of the education facility. A letter on official letterhead must also be supplied which states the following information about the student:

- name and date of birth
- enrolment details
- the reason beyond the students control for not previously being able to attend two years of post year 10 study.

Submit this application with attached letter and a photocopy of the Concession Card (if applying for free travel) via:

- **email:** bus.passes@stategrowth.tas.gov.au (PDF or JPEG only)
- **mail:** Passenger Transport, GPO Box 1242, Hobart TAS 7001

What happens next?

Applications can take up to four weeks to process. You will receive a letter advising you of the outcome of your application.

Applications will not be accepted after 1 September of the current school year.

Pass number:

Entered by:

ID number:

Date:

office use only

I. STUDENT DETAILS

This section must contain the students details. If you are applying for free travel then the details in section I must match the details provided in section 4, except where the student is not the primary Concession Card holder (i.e. if the student is listed as a dependent on the card then section 4 must contain the details of the Concession Card holder).

Title:* Family name:* Given name(s):*

Residential address:*

Suburb/town:* Postcode:*

Postal address (if not same as above):*

Suburb/town:* Postcode:*

Daytime phone number:* Mobile: Date of birth:*

Email address:

*Required fields

2. TRAVEL DETAILS

Please list all bus services travelled on in the AM or the PM.

	From (suburb)	To (suburb)	Bus operator
1st AM	<input type="text"/>	<input type="text"/>	<input type="text"/>
2nd AM	<input type="text"/>	<input type="text"/>	<input type="text"/>
1st PM	<input type="text"/>	<input type="text"/>	<input type="text"/>
2nd PM	<input type="text"/>	<input type="text"/>	<input type="text"/>

3. ELIGIBILITY

Please indicate the circumstances beyond your control which prevented you from having the opportunity to complete two years of post year 10 study:

- | | Yes |
|--|--------------------------|
| a. delayed entry at the start of your school life | <input type="checkbox"/> |
| b. time required to complete two equivalent years of post year 10 training and education has been extended because of disability | <input type="checkbox"/> |
| c. late completion compared to others in your age group due to initial overseas or interstate enrolment | <input type="checkbox"/> |
| d. humanitarian entrant status | <input type="checkbox"/> |
| e. interrupted education progress due to: (please circle) | <input type="checkbox"/> |
| • disability | |
| • illness | |
| • family circumstances | |
| • frequent changes to school | |
| • other circumstances (details must be provided) | |

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4. CONCESSION CARD DETAILS (IF APPLYING FOR FREE TRAVEL)

This section must be completed by the Concession Card holder. Please provide a copy of the Concession Card with this application.

Please indicate card type and your Customer Reference Number (CRN) or Department of Veterans' Affairs (DVA) file number

Health Care Card: Pensioner Concession Card: Veterans' Affairs Pension Card:

Enter CRN number below (the CRN is 9 numbers and 1 letter)

Enter DVA number below

Do not use your Medicare card number

If the card holder is not the student please provide details:

Title: Family name:

Given name(s): Date of birth:

Customer Consent:

I, authorise:

- the Department of State Growth to use Centrelink Confirmation eServices to perform a Centrelink Confirmation eServices enquiry of my Centrelink or Department of Veterans' Affairs Customer details and concession card status in order to enable the Department of State Growth to determine if I qualify for a concession, rebate or service.
- the Australian Government Department of Human Services to provide the results of that enquiry to the Department of State Growth.

I understand that:

- the Australian Government Department of Human Services will use information I have provided to the Department of State Growth to confirm my eligibility for a special circumstance adult student bus pass and will disclose to the Department of State Growth personal information including my name, address, payment and concession card type and status.
- this consent, once signed, remains valid while I am a customer of the Department of State Growth unless I withdraw it by contacting the Department of State Growth or the Department of Human Services.
- I can obtain proof of my circumstances / details from the Australian Government Department of Human Services and provide it to the Department of State Growth so that my eligibility for a special circumstance adult student bus pass can be determined.
- if I withdraw my consent or do not alternatively provide proof of my circumstances / details, I may not be eligible for a special circumstance adult student bus pass provided by the Department of State Growth.

<input type="text"/>	<input type="text"/>	<input type="text"/>
Card holder name	Signature	Date dd/mm/yyyy

5. ADVOCATE DETAILS (IF APPLICABLE)

This section allows you to nominate someone to provide assistance with your application, respond to questions and act on your behalf.

Title: Family name: Given name(s):

Job title: Organisation:

Address:

Suburb/town: Postcode:

Daytime phone number: Relationship to applicant:

Email address:

6. SCHOOL DETAILS

To be completed by the Principal, Assistant Principal, or Student Coordinator only. A letter explaining the special circumstances and providing the additional information required, as detailed in the guidelines, must be attached.

What is the name of your educational facility?

Is this the first or second year of post year 10 study? first year second year

I confirm that:	Yes	No
• the student is enrolled full time (600+ hours per year) and the course runs for the full school year	<input type="checkbox"/>	<input type="checkbox"/>
• the course level is equivalent to, or lower than that offered at year 11 or 12	<input type="checkbox"/>	<input type="checkbox"/>
• the student has not completed two equivalent years of post year 10 education or training	<input type="checkbox"/>	<input type="checkbox"/>
• the student satisfies one or more of the eligibility criteria	<input type="checkbox"/>	<input type="checkbox"/>
• I have attached a letter in support of this application*	<input type="checkbox"/>	

SCHOOL REPRESENTATIVE DECLARATION

I declare that the information I have attached to this application is correct, and I authorise officers of the Department of State Growth to conduct any verification checks deemed necessary.

Principal/Assistant Principal/Student Coordinator name Contact phone number

Email

Signature Date dd/mm/yyyy

*If the supporting letter is not attached, the application cannot be approved.

7. PERSONAL INFORMATION PROTECTION STATEMENT

You are providing personal information to the Department of State Growth, which will manage that information in accordance with the [Personal Information Protection Act 2004](#). The personal information collected here will be used by the Department for the purpose of assessing eligibility for the student concession travel program and for cross-checking eligibility for other travel assistance. Failure to provide this information may result in your application not being able to be processed or records not being properly maintained. The Department may also use the information for related purposes, or disclose it to third parties in circumstances allowed for by law. You have the right to access your personal information by request to the Department and you may be charged a fee for this service.

8. STUDENT DECLARATION

I declare that the information I have given is correct and I authorise officers of the Department of State Growth to conduct any necessary checks to verify the information I have supplied.

Name Signature Date dd/mm/yyyy