

SHREWSBURY COLLEGES GROUP

Application for post 16 Travel from Newport

General Criteria

- Priority will be given to students aged 16-18 but students who are older may be considered
- Students must be enrolled on a course at Shrewsbury College or Shrewsbury Sixth Form.

Costs

There will be a charge for this service, however, students who are 16-18 can apply to the College for financial help from the Student Bursary and Hardship Fund. To do this they must see Student Services as soon as possible. Students will pay the subsidised rate of **£600** for the academic year. Payment can be made each term as below:-

Autumn Term **£200** Spring Term **£200** Summer Term **£200**

Payment to be made before the start of term as invoices are NOT sent out.

PICK UP POINTS ARE:

FROM Newport (morning)

07.20 Butingsdale (just off A41)
07.30 Hinstock (Just off A41)
07:40 Newport - Stafford Road
07:45 Newport – High Street
07:55 Edgmond (B5062)
08.10 Crudgingtom (B5062/A442)
08:15 High Ercall (B5062)
08.20 Roden (B5062)
08:30 London Road
08:35 The Abbey – Bus Stop
08:40 Barker Street (Opposite Rowley Mansion)

FROM Shrewsbury (afternoon)

16.30 Barker Street (Opposite Rowley Mansion)
16.35 The Abbey Bus Stop
16.40 London Road
16:55 Roden
17:00 High Ercall (B5062)
17:05 Crudington (B5062/A442)
17.15 Edgmond (B5062)
17:30 Newport - High Street
17:35 Newport – Stafford Road
17:45 Hinstock (Just off A41)
17.55 Butingsdale (Just off A41)

How to apply Please fill out the application below and return to Student Services as soon as possible, so that you reserve your seat (we operate a first come, first serve policy). You need to book early to avoid disappointment. Once an application has been made, your name will then be added to a list that will be given to the bus driver. Once payment is made a bus pass will be issued. Without an application/payment or an application to the bursary, you will be refused travel.

Please cut along this line and return to STUDENT SERVICES, Shrewsbury College, London Road, Shrewsbury, SY2 6PR. Keep the above for your records

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NEWPORT – NEWPORT – NEWPORT – NEWPORT – NEWPORT – NEWPORT

Parent/Guardian _____ Student Name _____

Address: _____ Students D.O.B ___/___/___ ID _____

Post Code: _____ (Please circle) Apprentice/Full Time/Part Time

Tel: _____ Mobile _____ PICK UP POINT from above _____

HOW DO YOU INTEND TO PAY FOR THIS SERVICE? (Please circle) Self/Bursary/Other _____

OFFICE USE Date Received	/ /	Date/Entered on S/Sheet RCVD	/ /	Payment? Self/Bursary/Other	Signature
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