

CHANGE OF ADDRESS REQUEST FOR SEN HOME TO SCHOOL TRANSPORT

Student Name: _____

Date of Birth: _____

Current/Previous Address

New Address

School Attending: _____

Contact Details

Mobile: _____

Home: _____

Email: _____

When is transport required from the new address: _____

Are there any changes following your house move which may affect transport?

Please confirm that you have advised the Statutory Assessment Service of your new address.

Yes No

Date: __ / __ / __ **Signature:** _____

Please return to -

Email: SEN.TransportAssessmentTeam@essex.gov.uk

Post: SEN Transport Assessment Team, PO Box 4261, County Hall,
1GS

Chelmsford, CM1



