

Child's name _____ **School Transport and Me** _____ Date _____

Provider _____ Contract No. _____

On transport I like...

I like to communicate by...

I find it difficult when...

You can support me by...

Child's name _____ **School Transport and Me** _____ Date _____

Provider _____ Contract No _____

The equipment I use on transport is...

I have health needs. You need to be aware that...

I would also like you to know...

Parent/Carer Name _____

Parent/Carer Signature _____

Date _____