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Safe Routes in Communities

Scheme Request and Assessment

Pro forma

The information provided in this pro forma will provide an insight as to why a Safe Routes in Communities Scheme is required and what benefits could potentially be provided. The pro forma will also allow Council Officers to make an objective assessment of all requests. Therefore it is essential that the information you provide is as detailed and informative as possible. To adequately complete this pro forma and obtain the necessary information you will be required to undertake some form of consultation.

1. Name of School coordinating this application?
2. Name of main contact leading the application for a Scheme?

Name(s):

Designation:

Address:

Telephone No: Mobile:

Email address:

1. Location/Area of School to be considered for potential Scheme?
2. What public facilities are located within the local vicinity of the school? (Please include any known National Cycle Network or walking routes)
3. Please describe in detail what problems/concerns you have identified and/or are being experienced by the school community with regards to the following. These may be identified having undertaken a surveying exercise.

Walking:

Cycling/Scooting:

Public Transport:

Road Safety:

1. From your consultation, what potential improvement ideas have the school community identified to overcome the problems/concerns listed above?
2. Have the identified concerns and potential solutions been listed or included in any other improvement/action plan? (E.g. School Travel Plan, Action Plan/Initiatives). If so, please provide details? (Full Plans may be attached to the back of this form).
3. Please provide any evidence you have gathered that highlights the need for the suggested improvements. This may be in the form of pedestrian or vehicle count surveys, photographs, completed questionnaires or consultation/survey responses. (Supplementary information may also be attached to the back of this form).
4. Please provide any further information/comments that you feel may be of importance or help with your request for a Safe Routes in Communities Scheme

Print Name:

Signed:

Designation: