

**CARMEL UNIFIED SCHOOL DISTRICT
APPLICATION FOR SCHOOL BUS TRANSPORTATION**

Dear Parents/Guardians:

Please complete the form below if you wish to purchase a bus pass for your child/children, and return it to the school office with a check or money order. The first child riding the bus costs \$200/year. If you have two children, the cost is \$400/year. Three or more children riding the bus is \$500/year. **We request that you do not send cash unless absolutely necessary.**

One Student: \$200.00 **Two Students:** \$400.00 **Three or More Students:** \$500.00

Partial payments will not be accepted, except for situations of emergency and with the recommendation of the Principal and approval of the Superintendent/designee.

If there are any questions, please call your child's school office or the CUSD District Office (624-1546) for further information.

Please complete the information below. **Return all copies to your child's school** with your remittance. If you have children at several schools, you may return this form to any school site and the information will be forwarded to the other sites. After the information has been processed by the school office, a copy will be returned to you as your receipt. Please use a ballpoint pen so all copies are legible.

BUS PASS REQUEST (Please print)

1 st Child: \$200.00/yr	CHS	CMS	River	Tularcitos	Cooper	_____	_____
						Last Name	First Name
2 nd Child: \$200.00/yr	CHS	CMS	River	Tularcitos	Cooper	_____	_____
						Last Name	First Name
3 rd Child: \$100.00/yr	CHS	CMS	River	Tularcitos	Cooper	_____	_____
						Last Name	First Name
4 th Child: \$-0-	CHS	CMS	River	Tularcitos	Cooper	_____	_____
						Last Name	First Name
5 th Child: \$-0-	CHS	CMS	River	Tularcitos	Cooper	_____	_____
						Last Name	First Name

Total Amount Enclosed: \$ _____ Check # _____ Money Order Cash Employee

Parent Name: _____

Residence Address: _____

Mailing Address: _____

Daytime Phone: _____
Home Work

FOR OFFICE USE ONLY
Amount Paid _____
Date Paid _____
Received By _____
Receipt # _____
Amount Due _____

SEND ALL COPIES TO THE SCHOOL OFFICE. A PINK COPY WILL BE RETURNED AND WILL SERVE AS YOUR RECEIPT.

- Copies: White - School Office
- Canary - MOT
- Pink - Parent/Guardian
- Goldenrod - District Office