BUS FORM

Photograph

01. Name of the child :_____

02. Name of Parents/Guardian ::_____

03. Name of Mother: :_____

04. Residential Address_____

_____

Mob. No._____ Telephone No._____

05. Official Address_____

Mob. No._____ Telephone No._____

06. Pick up point (Subject to School Route)_____

Signature : Father : _____ Mother : _____

(To be filled in by the Office)

07. Class Teacher :_____

08. Route Number Allotted :_____

Note : -

1. No student can change the Bus route without prior permission of the Principal.
2. No one except the students and teachers are allowed to board the Buses.
3. **In case the child misbehaves in the Bus, the School can withdraw the bus facility of that student.**

Dear Sir,

I request that my son / daughter / ward .....

Admn. No. ..... Class ..... Section ..... may be permitted

to use the school bus for his / her journey from our residence in .....

..... to the school and back, with effect from .....

at my own risk and responsibility.

I will pay the bus charges as fixed time to time, by the school.

I understand that the bus service is not mandatory. It is a facility for the safety and convenience of the student and parent. **It can be altered or withdrawn at any time on short notice at the sole discretion of the Management.**

Thanking you,

Yours faithfully,

_____

(SIGNATURE OF THE PARENT /GUARDIAN) **DATE :**_____

Name :_____

Address :_____

Phone (Off.) :_____ (Res.) :_____

Note : - The school requires one calendar month notice for discontinuation of bus service falling which bus fee for the month following the month of receipt of the notice will also be payable.