

**(B61) APPLICATION FOR PRIVATE SCHOOL TRANSPORTATION**

*Please submit a separate application for each child*

SCHOOL YEAR \_\_\_\_\_ - \_\_\_\_\_ RESIDENT DISTRICT BOARD OF EDUCATION \_\_\_\_\_

STUDENT NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
LAST FIRST MIDDLE MONTH DAY YEAR

PARENT OR GUARDIAN \_\_\_\_\_ HOME PHONE (\_\_\_\_) \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY OR TWP. \_\_\_\_\_ ZIP \_\_\_\_\_

NEAREST INTERSECTION TO STUDENT'S RESIDENCE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

FULL NAME OF SCHOOL TO BE ATTENDED \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

ADDRESS OF SCHOOL \_\_\_\_\_

STUDENT GRADE FOR COMING YEAR \_\_\_\_\_ DISTANCE FROM HOME TO SCHOOL \_\_\_\_\_ . \_\_\_\_\_ (MEASURED VIA SHORTEST PUBLIC ROADWAY OR WALKWAY IN MILES AND TENTHS)

DATE SCHOOL OPENS \_\_\_\_\_ CLOSES \_\_\_\_\_ SCHOOL HOURS FROM \_\_\_\_\_ A.M. TO \_\_\_\_\_ P.M.

NAME AND ADDRESS OF LAST SCHOOL OF ATTENDANCE \_\_\_\_\_

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE \* FOR PUBLIC SCHOOL USE ONLY**

YOUR APPLICATION HAS BEEN REVIEWED BY THE RESIDENT DISTRICT BOARD OF EDUCATION. THE FOLLOWING DETERMINATION HAS BEEN MADE:

\_\_\_\_\_ TRANSPORTATION WILL BE PROVIDED \_\_\_\_\_ YOU ARE ELIGIBLE FOR PAYMENT IN LIEU OF TRANSPORTATION

\_\_\_\_\_ INELIGIBLE \_\_\_\_\_ (REASON)

DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_ SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_