

APPLICATION FOR SCHOOL BUS PASS/SINGLE RIDE TICKET BOOK 2019-2020

Snowline Joint Unified School District (SJUSD) ~ Transportation Department

9558 Wilson Ranch Road ~ Phelan ~ California 92371 ~ (760) 868-5624

<https://snowlineschools.edlioschool.com/apps/pages/transportation>

INCOME DISCLOSURE FORM AND PROOF OF INCOME MUST BE SUBMITTED FOR FREE/REDUCED BUS PASS

1. Information about Parent or Guardian (Please Print)

Name _____ Home Phone (____) _____
Physical Address _____ Mailing Address: _____
City, State, and ZIP _____ City, State, and Zip _____

2. Information about Student(s) and Pass(es)

FIRST STUDENT

Full Name _____ Date of birth _____
School _____ Grade (2019-2020): _____
Type of Bus Pass (Check one) Single Ride Ticket Books
 Annual round-trip 1st Semester round-trip 2nd Semester round-trip

SECOND STUDENT

Full Name _____ Date of birth _____
School _____ Grade (2019-2020): _____
Type of Bus Pass (Check one) Single Ride Ticket Books
 Annual round-trip 1st Semester round-trip 2nd Semester round-trip

THIRD STUDENT

Full Name _____ Date of birth _____
School _____ Grade (2019-2020): _____
Type of Bus Pass (Check one) Single Ride Ticket Books
 Annual round-trip 1st Semester round-trip 2nd Semester round-trip

ADDITIONAL STUDENTS PLEASE USE BACK SIDE OF APPLICATION----->

3. Instructions: Please **mail** or bring this **application** and your **payment**, for each student to: SJUSD Transportation Bus Pass Office: P.O. Box 296000 - 9558 Wilson Ranch Road, Phelan, CA 92329-6000

If submitting application and payment through S.J.U.S.D. web site, follow all instructions on-line for obtaining bus pass

4. Method of Payment: *Please do not send cash.*

Check or Money Order - Payable to S.J.U.S.D. Transportation (credit card-debit payments only available on-line)
SJUSD will assess a \$16.00 service charge for returned check. Lost/Damaged Replacement fee is \$10.00 for each pass

KINDERGARTEN THRU 5TH GRADE STUDENTS ONLY (PLEASE SELECT ONE):

- The student named below **must be met** at the school bus stop by a parent or designated adult for the 2019-2020 school year. (Must Be Met Form attached) Student: Name: _____
- The student named below **may be released** at the school bus stop without a parent or designated adult for the 2019-2020 school year. Student Name: _____

My signature authorizes SJUSD Transportation to transport my student to and from the assigned bus stop as printed on bus pass. **I also realize that my student must review and adhere to the rules and regulations for safe bus riding as per the Transportation Safety Plan, which is available in the bus pass office and on our website.** With your help and the cooperation of all the student passengers, we will be able to continue to provide safe transportation for all passengers. **All students are required to display his/her school bus pass to the bus driver each and every day before boarding at bus stops and school loading zones. Students without a current bus pass or single ride ticket shall be denied transportation services and will be referred for possible disciplinary action.**

I HEREBY ACKNOWLEDGE THAT I AGREE WITH AND WILL ADHERE TO THE ABOVE MENTIONED TERMS.

Parent/Guardian Signature: _____

DISTRICT USE ONLY

ASSIGNED BUS STOP: _____ BUS ROUTE: _____
TYPE OF PASS: _____ Mailed or handed to parent/student: _____
TOTAL AMOUNT PAID: _____ METHOD OF PAYMENT _____
PASS ISSUED BY: _____ DATE PROCESSED: _____