BUS PASS APPLICATION – Chino Valley Unified School District

One application must be completed for each bus riding student. If your child is ineligible for transportation, but is accepted on a space available basis, your child could again become ineligible if space is no longer available on the bus. Free or reduced bus passes are available for qualifying households based on California Department of Education income eligibility guidelines. (Verification of income is required and must be submitted to the Transportation Department Offices)

Parent/Guardian Information (please print Note: This application is not needed for ov	•	eeding transportation.	
Parent/Guardian Name	_	() Home Phon	e
Address	_	(<u>)</u> Work Phone	e
City/Zip	_	(<u>)</u> Cell Phone	
Student Information (please print)			
Student's Full Name	_	School	
Grade Total Number of Bus Riders in Household _		Comments Total Fees Submitte	d
Gross Monthly Household Income (FREE OR REDUCED ONLY)	_	Number of People in Household (FREE OR REDUCED ONLY)	
Certification (please read carefully before signing) I ce district officials. Deliberate misrepresentation of the The child listed above hereby has my permission to point of the series of the child listed above hereby has my permission to point of the child listed above hereby has my permission to point of the child listed above has paid in advance (Make of the for all returned checks (\$30) and replacement bus pasted the bus driver each time they board the bus both a.m. services. Additionally, my signature on this application than the distribution of the services and regular and we will comply with all rules and regular and that there is NO REFUND for bus passes useligibility is lost. Lastly there will be NO REFUND rendered.	information provided in the carticipate as a CVUSD shecks payable to CVUSD sees (\$25). I also undernament of the carticles with the carticles that I agree to call also moves of the carticles of	may subject the applicant to prosect chool bus riding student. I acknowled. I acknowled. I understand that the District wirstand that my child must present thout their valid bus pass will be detoread and discuss with my child (reine privilege of the school bus transpout of the District, out of the busing	ution under state statutes. Ledge the fee for my child's Il impose an additional fee heir valid bus pass daily to enied transportation n), the "School Bus Rider's portation provided. I further area or if space available
Parent/Guardian Signature		Today's Date	
To Be Completed by Transportation Office Staff		Regular Eligible or Space Available (Circle one)	
Bus Stop Location		Route Number	
Fee Amount Staff Meml	<u>()</u> ber Initials	Receipt Number	Method of Payment
Comments:			
STUDENT SCHOOL I.D. #			

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