



GALT HIGH SCHOOL DISTRICT-TRANSPORTATION DEPARTMENT
SCHOOL BUS PASS APPLICATION
 2016-2017 SCHOOL YEAR

Please complete all steps of the application and return to the Galt High School District Office, 12945 Marengo Rd, Galt, CA-95632
 Questions? Call us at 209-745-3061

PASS MUST BE DISPLAYED TO BOARD THE BUS

Students attending school through an Intra-district/Inter-district Transfer are not eligible for transportation

Family Information			FOR OFFICE USE ONLY	
Parent /Guardian Name:			PROCESSED DATE _____ Fee _____	
Home Phone	Cell Phone	Work Phone	CHK AMT. _____ CC AMT. _____ CASH _____	
Address _____ Apt# _____			CHK# _____ CC AUTH# _____	
City/Zip _____			ACCEPTED BY _____	
Email (optional) _____			FAX _____ MAIL _____ WALK IN _____ EMAIL _____	

Student(s) Information All Student(s) Information must be completed. Students will be assigned a stop, relative to home address, if one is not listed below.

NAME	ID	SCHOOL/GRADE	BUS STOP

<u>Type of Service/Fees</u>	<i>Per Student</i>
Annual Service Round Trip	\$200 <input type="checkbox"/>
Semester Service Round Trip	\$105 <input type="checkbox"/>
One Way Punch Cards (20 punch #'s per card)	\$35 <input type="checkbox"/>

Circle Payment type:
 Check, Cash or Credit Card (If Available)

Students eligible for free transportation due to (check the applicable box)

Homeless Enrolled in Free/Reduced Lunch Program

Low Income Foster Status

All documentation must be included with this application to qualify

Complete Back Side of the Application if checked above

Special Education
 No need to fill out back side of this form

By signing below I confirm I have read and agree to adhere to the GJUHS D transportation rules & regulations concerning the transportation of students on District vehicles. I understand that riding a school bus is a privilege, and that failure to follow District rules and regulations and/or the direction of any school bus driver may result in disciplinary action up to and including the denial of transportation services without refund. I also verify that that the information contained in this document is true and correct. I understand that falsification of information is cause for the revocation of transportation services without refund. If I am paying by credit card, my signature also authorizes charges to the account indicated above. I understand that use of the credit card is subject to the terms and conditions of the issuing bank. I further understand the bus pass issued by GJUHS D must be displayed every time my student boards the bus, and that a \$15.00 Processing Charge will be assessed for the replacement of a bus pass(es) for any reason. I understand that video and audio surveillance equipment may be used on any District vehicle, and that boarding any vehicle constitutes consent to audio and video recording and use of any recording(s) in disciplinary proceedings.

Signature of Parent/Guardian _____ **Date** _____

