



## Columbus City Schools Transportation Services Department

### 2016 - 2017 REQUEST FOR PUPIL TRANSPORTATION TO A COMMUNITY SCHOOL

**A separate application must be submitted for each pupil.** Use the **student's full, legal name.** Only one transportation service will be provided per pupil. Information must be provided along with certification by the school administrator. Reimbursement-in-lieu of transportation is provided **only** if no school bus or COTA Pass is available. The due date for full year reimbursement is **September 30, 2016.** **Late applications will be prorated from the date of receipt.**

**Student Information** Check all that apply:  New Student  Returning Student  Address Change \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Effective Date Of Change

**Please Print or Type**

Last Name	First Name	Middle Initial
Date of Birth (mm/dd/yyyy)	Sex	Race
Grade	Home Phone	
Address	City	Zip
Mother/Guardian Name	Daytime Phone	Other Phone #
Father/Guardian Name	Daytime Phone	Other Phone #
Emergency Contact Name	Relationship to Student	
Emergency Contact Address	Phone #	Other Phone #
Name of School Transportation is Requested to:	Enrollment Date	
What School did your child previously attend?	Withdrawal Date	

**Parent Signature (REQUIRED FOR PROCESSING)** \_\_\_\_\_ Date \_\_\_\_\_

**School Certification (Must be completed by the school administrator & required for processing)**

I hereby certify that the above student **resides** in the **Columbus City School District** and was enrolled as of \_\_\_\_\_ (mm/dd/yyyy) at \_\_\_\_\_ School for the **2016- 2017** school year, has been entered into the OSES with SSID # \_\_\_\_\_, and is eligible for services provided by Columbus City Schools Transportation Dept. I further certify that I will notify Columbus City Schools **immediately** if the above student is withdrawn.

**School Administrator Signature (REQUIRED FOR PROCESSING)** \_\_\_\_\_ Date \_\_\_\_\_

**Columbus City Schools Transportation Department Use Only**

Service Provided (check only one):	<input type="checkbox"/> School Bus	<input type="checkbox"/> COTA Pass	<input type="checkbox"/> Reimbursement	Start Date
Bus Route #	Time & Location			Processed By

***Incomplete Applications Will NOT Be Processed***