

Beverly Public Schools
502 Cabot St.
Beverly, MA 01915

**Application For Transportation
Mandated Students**

1. Mandated students are those students in Grades ½ K-6 who live more than 2.0 miles from the assigned school.
2. The bus route currently in place is subject to change.
3. The application deadline is August 1, 2010.
Applications received after this date will be subject to a \$25.00 late charge.
4. Bus passes will be issued to students in Grade 6 - 12. No passes are issued to students in Grades K thru 5.
** Notice of Nondiscrimination All students
All educational and non academic programs, activities, and employment opportunities at Beverly Public Schools are offered without regard to race, color, sex, religion, ancestry, national origin, sexual orientation, disability, and any other class or characteristic protected by law.

**Application for Transportation
Non-Mandated Students**

1. The cost will be \$306.00 for the 2010/2011 school year.
2. The bus route currently in place is subject to change.
3. The application deadline is August 1, 2010.
Applications received after this date will be subject to a \$25.00 late charge.
4. I will receive confirmation in the form of a bus pass. Passes will be mailed to home address at least 1 week prior to the schools reopening.
5. If transportation will not be provided, my check will be returned by September, 2010.
6. Payment may be made in two installments. A check for \$153.00 must accompany application. The remaining balance of \$153.00 is due on or before January 1, 2011.
7. **PAYMENTS BY CHECK OR MONEY ORDERS ONLY.**
NO CASH PAYMENTS CAN BE ACCEPTED.

(CUT AND RETURN)

Please print:

Student's Full Name: _____

Home Address: _____ Home Phone: _____

Work or Cell Phone: _____

SCHOOL:-----GRADE _____

*KINDERGARTEN HALF DAY ONLY AM----- OR PM-----SESSION
OR FULL-DAY KINDERGARTEN _____

MIDDAY ½ DAY KINDERGARTEN BUS YES ____ NO ____

BOTH WAYS _____ AM RIDE ONLY _____ PM RIDE ONLY _____

We have read the above Terms and Conditions for Bus Riding Privileges and agree to do all that we can to see that our child complies with bus rules.

Parent/Guardian Signature: _____

PLEASE ALSO PRINT YOUR NAME HERE _____

I have read and understand the above Terms and Conditions for Bus Riding Privileges and agree to follow these rules.

Student Signature (over age 7): _____

THIS SIGNED FORM MUST BE RETURNED TO RECEIVE A BUS PASS.

OFFICE USE ONLY

MANDATED

NON-MANDATED

DATE

PASS#

ROUTE#

AMT. PAID:

CHECK#

BALANCE DUE: