



Morongo Unified School District

2010/11 Bus Pass Application

Submit ONE application per address

Students last name(s) _____

Physical address _____

Apt # _____

City _____

Zip code _____

Mailing address _____

Apt # _____

City _____

Zip code _____

LIST ALL STUDENTS WHO REQUIRE TRANSPORTATION

	Students Last Name	First Name	School	Grade	Date of Birth (MM/DD/YYYY)
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____

Parent/Guardian Name: _____ Primary Phone _____ Other Phone _____

Emergency Contact: _____ Primary Phone _____ Other Phone _____

Please check the appropriate box(s) below

1/2-year fee (full) <input type="checkbox"/>	\$100.00	2nd student (disc) <input type="checkbox"/>	\$50.00	3rd student + <input type="checkbox"/>	Free
1/2-year reduced <input type="checkbox"/>	\$25.00	2nd student reduced <input type="checkbox"/>	\$10.00	3rd student + <input checked="" type="checkbox"/>	Free
		My Student is:* <input type="checkbox"/>	Free		

***Copy of Nutritional Services eligibility letter required**

Payments are only accepted as cashiers check, money order, or cash (at District Office)

Prorated passes are available for students new to the district or qualified change of residence ONLY @ \$20.00 per month

Transportation use only

Paid by _____ Rec'd By (initials) _____

Parent/Guardian Signature** _____

Date _____

** Your signature acknowledges that you have read and agree to the Transportation Department policies, have reviewed the bus rules*** with your students and understand that School bus passes are refundable only under certain circumstances with approval.

Return white and canary with payment, retain pink for your records