

**BLACK OAK MINE UNIFIED SCHOOL DISTRICT
SCHOOL BUS TRANSPORTATION APPLICATION
2020-21**

Information on Transportation and the Bus Rules and Regulations is included in this packet. It is your responsibility to read regarding student responsibilities and conduct on school buses.

Complete this application for all students who will ride the school bus to and/or from school. Only one application per household is necessary. **Mail application with payment to Black Oak Mine Unified School District, 6540 Wentworth Springs Rd., Georgetown, CA 95634 or drop them off at the Maintenance Office between 8:00AM -12:00PM.** Please make checks payable to **BOMUSD**.

PARENT/GUARDIAN INFORMATION:

Mother's Name _____ Father's Name _____
 Mailing Address _____
 Physical Address _____
 Home Phone # _____ Mother's Work # _____ Father's Work # _____
 Email Address _____

STUDENT INFORMATION: List all students in your household that will be taking the bus. Check if the student is a foster child. If you are eligible CalFresh, CalWORKs or FDPIR, please include your case number.

Student Name	Check if Foster Child	CalFresh, CalWORKs or FDPIR#	Grade	School	Bus Stop	Bus Pass # (District Office Use)

TYPE OF PASS YOU WOULD LIKE TO PURCHASE:

Amount Enclosed: \$ _____

- Daily Round Trip
- Free/Reduced Rate Round Trip
- AM or PM Semester

If applying for Free or Reduced Rate Transportation, please list all adult household members and the amount of monthly income each household member received last month (include wages of all working members living in the household including parents, children, grandparents, etc., child support, alimony, social security and all other incomes). Approval of a family's eligibility for this option is subject to verification of its income amounts. The District reserves the right to request letters, paycheck stubs, court decrees and other support documents to prove income amounts.

Name of Adult Household Member	Gross Earnings (monthly before deductions)

TOTAL NUMBER OF PEOPLE LIVING IN THE HOUSEHOLD _____ (Include children not in school)

I certify that the facts mentioned above are accurate to the best of my knowledge, and I understand that the District may cancel or deny my eligibility under the free and reduced rate program for any misuse or resale of passes or tickets or misrepresentations of any facts and circumstances connected with my participation in its benefits. I understand that it is my responsibility to notify the District of changes in my financial status that may make my children subject to the transportation fee.

Parent Signature _____ Date _____