

## 2023-2024 School Year Student Transportation Request for Payment

In-lieu of reimbursement for school transportation is approved *year by year*. You <u>must</u> submit a new in lieu of application (**form 602**) <u>each school year</u> for <u>each student</u>. Reimbursement mileage will be measured to the nearest bus stop; or to the school if no bus stop is available. Mileage calculation for reimbursement is calculated for transporting students **one way** from home to stop/school and **one way** home from stop/school. It is <u>your responsibility</u> to submit this form to the school secretary for attendance verification and administration approval. *All requests for payment must be submitted to the school no later than the last day of school in the current school year in order to be eligible for reimbursement.* 

STUDENT TRANSPORTATION REQUEST FOR PAYMENT				
CLAIMENT INFORMATION	Parent/Guardian Name:			
	Mailing Address:			
	City:	State:	Zip	
	Email Address:			
STUDENT INFORMATION	Student Names on Request:			
	1		Grade:	
	2.		Grade:	
	3.		Grade:	
	4.		Grade:	
	Requested Dates for Reimbursement (verified by school attendance records):			
SIGNATURE	I hereby certify that the information provided on this form is true and accurate. All requests for payment must be submitted to the school no later than the last day of school.			
	Signature of Parent/Guardian:		Date:	
FOR OFFICE USE ONLY				
LOVE THE PERSON	ble Miles per Day*  verified from form 602)	thorized by Signat	ure:	
Tota Tota	Days X Eligible Miles Per Day = Total Miles  Miles X \$0.40 = Total \$\$ Reimbursable X	=	X 0.40 =	
Reiml	# of Days Miles pe	r day Total Miles	Total	

Transportation Authorized by Signature:	Date:
APPROVED DENIED	