

OCCASIONAL ONE-WAY USE COUPONS



BUS PASS APPLICATION

2018-19

ONE APPLICATION PER FAMILY

OFFICE USE ONLY

Date Processed: _____

LAST NAME OF STUDENT(S): _____

STUDENT(S) FIRST NAME	GRADE	SCHOOL	PICK-UP/DROP-OFF LOCATIONS		
			<small>EM, TOW, TMS</small>		<small>DESIGNATED BUS STOPS</small>
1)					
2)					
3)					
4)					

PARENT PERMISSION:

Your signature indicates that you have read and understand the rules and regulations by which your student(s) must abide while riding any District school bus. All existing policies and rules regarding safety, student behavior and discipline on the bus remain in affect. Please review rules and regulations which are available at each site and online at www.LBUSD.org. With your assistance LBUSD can continue to provide safe transportation. All students must behave appropriately while on the bus. Citations will be issued for misbehavior. Misuse of pass (coupon) may result in suspension or termination of transportation privileges.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

PRINT FIRST AND LAST NAME: _____

Address: _____ Apt. # _____ City: _____ ZIP: _____

Home Phone: _____ Work/Cell Phone: _____

Please note: LBUSD will assess a \$25.00 fee, for checks returned by the Bank.