

TRANSPORTATION DEPARTMENT 18751 RAILROAD AVE. SONOMA, CA 5476 School Bus Pass Form: Year 2023-24

Office: 707-935-6092 Fax: 707-939-4899 E-mail - transportation@sonomaschools.org

Transportation Need For:	☐ Home to School	☐ School to H	ome		B&G Club	Only
PLEASE PRINT CLEARLY (Date:					
Parent/Guardian Name:						
Home Address:						
Home Address:			City	S	tate	Zip
Student Pick up Address:	If Different than Home Addres	s				
Student Drop off Address:_						
Mother Name:	If Different than Home Addres	Mother Cell:				
Father Name:		Father Cell:_				
Emergency Contact Name:			Phone #	[‡] :		
Student in Special Education	on Program: <u>YES</u>	■ NO				
ALL I	RIDERS MUST <u>SHOW BUS</u>	S PASS EACH TIME	THEY BOA	ARD THE	BUS	
2023/2024 ANNUAL BUS One-Way & Discounte Waiver - Verification: *Copy or is for families on assistance p	ed Bus Fee: \$50.00 per f Direct Certification letter for	Rider		ents: FF	REE	
Name of Student	orograms).	School Nam	e	Grade	Period	ID#
	ASED from the school bu			_	adult.	
	Tat the school bus stop b	• .			.	
In the compliance with SVUS students will be assigned to Transferable and forgery or do to the driver upon boarding the All students are responsible to are to be observed while waiting	a bus stop, receive a bus uplicate use of a bus pass we bus for each ride. If pass is ofollow the rules listed belo	pass, and display the will result in expulsion f s damaged or lost, any w. These rules will ens	e pass for from the scl replaceme sure safe an	every bothool bus. nt will income.	arding. Bu Passes ne cur a \$10.0	s passes are Non- ed to be presented 0 or \$15.00 charge.
cause refusal of transp Transportation Dept. Bo	nd understand the rules and ortation to the student. I ag e respectful to other riders, shall ride the bus. DO NOT i	ree that my student wi the bus driver, people	ll follow all who are not	rules and	d regulation	ns for the SVUSD
Parent/Legal Guardian Sig	nature:		[Date:		
Once your form has been suc 5-7 working days.	ccessfully submitted, you sh	nould receive a respor	ise from tra	ansportat	tion regardi	ing ridership within
		ffice Use Only				
Amount Paid \$ Verified By:		Check #: Date:				l: