

OFFICE USE ONLY

Student's Last Name	First Name(s)	Processed By
Date	Pass Number(s)	Types(s)
Free/Reduced	\$ Amount Paid	Check No./Cash
		Date Mailed

AUBURN UNION SCHOOL DISTRICT

2011-2012 Free/Reduced School Bus Transportation Application

The District will determine eligibility for free/reduced Transportation based on the income level of the entire household.

PLEASE COMPLETE THE INFORMATION REQUESTED AND MAIL WITH VERIFICATION OF INCOME TO:

A.U.S.D. Transportation, 255 Epperle Lane, Auburn, CA 95603

Make checks payable to A.U.S.D. Transportation. Questions? Call 885-7242 ext. 8810

Please indicate the total number of people living in your household: # _____

The total household GROSS income, before deductions is: \$ _____ per year month

Monthly/yearly and includes wages of **ALL** members living in this household, including parents, children, grandparents, etc., child support, alimony, social security, retirement and other programs. Approval of a family's eligibility for this option is subject to verification of the income amounts. The District reserves the right to request letters, paycheck stubs, court decrees, and other support documents.

Parent/Guardian's Name _____ Social Security Number of primary wage earner/signer of this application _____

Street Address _____ City _____ Zip _____

Mailing Address (If Different) _____ Home Phone# _____

Mother Work Phone# _____ Father Work Phone# _____

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 eligibilities under the Reduced Price Program for any misuse or resale of these passes, or misrepresentations of any facts or circumstances connected with my participation in its benefits.

Parent/Guardian's Signature _____ Date _____

LIST ONLY AUBURN UNION SCHOOL DISTRICT STUDENTS THAT WILL RIDE THE BUS

Student's Name	Grade	School	Route No.

Student's bus stop: _____

NOTE: If your child leaves or returns to an address **OTHER** than your home address, please list:

Name _____ Address _____ Phone # _____

**ONE FORM PER HOUSEHOLD ~ STUDENTS NEED A PASS BEFORE RIDING THE BUS
ONLY COMPLETE APPLICATIONS WILL BE PROCESSED**