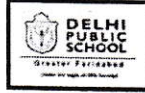


Note : In case you wish to avail the school bus facility, kindly fill the given form .For details of Bus Route Number and Bus Stop, you may contact the Transport Incharge, Sub M.P Singh at - 9266673288.



REGISTRATION FOR USE OF TRANSPORT FACILITY OF SCHOOL

To
The Principal
Delhi Public School, Greater Faridabad, Sector-81
Faridabad (Haryana)

REQUEST FOR USE OF TRANSPORT FACILITY

Respected Madam,

- I wish to submit that my ward is studying in your school as per details given below:-
Name _____ Class _____ Section _____ Adm No _____ (Session 2017-2018)
Category _____ (To be filled by office)
Revised Bus Route for 2017-2018 _____ Bus Stop _____
- Kindly grant permission for him/her to avail bus facility on payment of requisite transport charges with effect from _____.
- I will give one month's notice period towards discontinuation of bus service or pay one month of bus charges in lieu of the same.
- I will pay the bus charges for twelve months from April 2017 to March 2018.
- Any request for availing of bus facility will be entertained only at the commencement of quarterly period i.e. April, July, October and January only. No request for availing bus facility will be entertained at any time except the above.
- I understand that the bus will stop at the designated bus stop only. I will not force the driver to create or deviate any stop.
- I will be punctual to pick and drop my ward at the bus stop and do not expect the bus to wait. In case the parent/guardian is not available at the bus stop in afternoon, my ward will be brought back to school and will need to be picked up by the parent (Nursery -IV)
- I authorize the school to allow my ward to return home on his/her own in case the parent is not present at the bus stop (for classes V-XI)
- I will be courteous and patient with the school staff in the bus. I will not use any uncultured language/any physical force whatsoever. In such a case, the school reserves the right to discontinue the use of bus facility for my ward.
- I accept that if my ward is observed to disregard rule of disciplined conduct in the bus/be involved in any damage to the school bus, the facility of travel may be withdrawn for my child by the school. Also I shall be required to pay the cost of damage incurred.

Signature of the Parent

I have read the conditions for the grant of bus facility and will abide by them.

Yours sincerely,

(Signature of Parent)

Name of father _____ Tel No. _____ Name of mother _____ Tel No. _____

Residential Address & Tel No. _____

(Signature of Transport In charge)

(Signature of Principal)