

Stockton Unified School District

2963 Sanguinetti, Stockton CA 95205

Transportation – 209-933-7145

Fax: 209-943-2553

Bus Pass Application for TRANSPORTATION

Completed application should be mailed to:

Stockton Unified School District Transportation

2963 Sanguinetti Ln, Stockton CA 95205

buspass@stocktonusd.net

ONE APPLICATION PER FAMILY

School Year _____

(Please Print Clearly)

Parent/Guardian Name: _____

Date: _____

Street Address: _____

Mailing Address _____

Home phone: _____

Work phone: _____

Cell phone: _____

Email address: _____

Have you moved? _____

Last year's bus stop: _____

Student information (list ALL bus riders) If additional space is needed use the back of the form please.

(Please Print Clearly)

	<i>Student Last Name</i>	<i>Student First Name</i>	<i>School</i>	<i>Grade</i>	<i>Medical Condition</i>	<i>Student Id #</i>
1						
2						
3						
4						
5						
6						

*I understand transportation will only transport my child to his/her designated bus stop. I understand my student must present a valid bus pass each trip. **FAILURE TO DO SO MAY CAUSE REFUSAL OF TRANSPORTATION TO THE STUDENT.** Parents are advised that the district does not supervise bus stops.*

Parent/Guardian Signature _____

Date: _____

Date Received: _____

Received by _____

Issued Date: _____

Bus Stop: _____

AM Route/Time _____

PM Route/Time _____

Pass numbers:

1. _____

4. _____

2. _____

5. _____

3. _____

6. _____