

RIPON UNIFIED SCHOOL DISTRICT BUS PASS REQUEST FORM

The Ripon Unified School District provides home-to-school bus service to rural (country) residents. Bus service is also available to and/or from several bus stops in town for elementary age students. There is a fee for bus service. If you would like your student to ride the bus, please complete this form. Please return form along with payment to your student's school. Upon confirmation from the Transportation Department the student will be issued a bus pass. Please note that the bus passes are non-refundable. Before getting started, if applicable, please find the list of In-Town Bus Stops located in the Transportation section of the RUSD website at www.riponusd.net. Fees can be paid on Mealtime at www.mymealtime.com.

BUS PASS	TVDF.			
DUS FASS	AM Only – Semester Only PM Only – Semester Only AM & PM – Semester Only Family Maximum – Semester Only	\$100.00 Per student \$100.00 Per student \$100.00 Per student \$300.00	AM Only – Year PM Only – Year AM & PM – Year Family Maximum – Year	\$175.00 Per student \$175.00 Per student \$175.00 Per student \$450.00
PLEASE C	CHECK IF ANY OF THE F	OLLOWIN	G IS/ARE TRUE:	
Stuc		udent's Meal E y Band at RH	ligibility Letter	Information section*
BUS STOP	P INFORMATION:			
Will	l student ride bus from/to Hor YES	ne (rural stud	lents only)?	
If no	ot rural, please list pick up & o Morning pick up: Afternoon drop off:	drop off loca	tion(s) below:	
parent/guardia	ill only be transported to and/or from an and alternate arrangements have o known as the "Thomas Edward La	been made with	n the Transportation Departmen	t.

whether or not students who have not previously ridden a school bus will need to be escorted across the road at their bus stop.

Please note that bus passes are non-refundable. This includes, but is not limited to a student losing bus riding privileges. There

will be a charge to re-issue a bus pass.



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STUDENT INI	FORMATION:					
Student'	s First Name:	Student's				
Student'	s Home Address:					
Phone N	Tumber:					
Parent's Names:		Parent's Email Address:				
Student's School:		Student's Grade:				
If more than one	e student in family, pl	lease list additional stude	ents below:			
	First Name	Last Name	School	Grade		
Comments/Spec	cial Instructions:					
~p~						
	Signature of Parent/G		Date			
			2			
FOR DISTRIC In compliance with Assigned Bus S	AB-1297 the following i	nformation will be filled in an	nd given to the parent or gu	ardian of each new studen	t.	
	California Education Coop before the above a	de section 39381.5 the follow ssigned stop:	ing are approved bus stops	near your assigned stop:		
Bus Sto	p after the above ass	signed stop:				
Is driver escort	t required at this loc	ation?				
Date Confirme	d:					
Comments/Spe	ecial Instructions:					