



8/1/22

Dear Parents,

Transportation services for students who reside less than one mile from school, and not having to cross an approved IDOT serious safety hazard, is conditionally available subject to the following conditions:

1. Upon approval of the request, and prior to the initiation of transportation services, a fee shall be paid for at least one semester of transportation services. The fee shall be:
 - \$225.00 first semester (to and from school)
 - \$225.00 second semester (to and from school)
 - OR
 - \$450.00 for the entire school year (to and from school)
 - The "ONE WAY FEE" (for AM pick up or PM drop off only) is \$225.00 per year (\$112.50 per semester)
 - If requesting transportation for less than a full semester, the daily rate for transportation is \$2.50 per day (both ways), or \$1.25 per day (one way), to be paid in advance upon approval of the request.
2. All pick-ups and drop offs must be to existing bus stops. Unless extenuating circumstances exist, no bus stops will be added that are less than one mile from school for pay rider busing requests.
3. Transportation services will be provided on a space-available basis. If a new student resides more than one mile from school, thus being eligible for free bus service, and if a bus is at capacity, the child who was the last one to receive paid bus service will be the first one to be dropped from such service until another seat becomes available. If more than one student becomes eligible for the free bus service, the same procedure will apply to gain the additional spaces, as needed.
4. Please complete the information below and sign the request form, agreeing to the terms and conditions above. Once approved, the appropriate transportation fee will be due and payable to your child's School or to the Business Office before a pay bus card will be issued and the service will begin.

Thank you.

I hereby request pay rider student transportation services for the **2022-2023** school year.

Parent/Guardian Name _____

Student Name _____ School/Grade _____

Address _____

City/State _____ Primary Phone _____

Signature: _____