

Uintah School District

Application for In Lieu of Transportation

2018–2019 School Year

List children attending Uintah School District Schools:

Student Name:	Grade:	School Name:

Parent/Guardian Name _____

Home Address _____

Mailing Address _____

City _____ State _____ Zip _____

Phone Number _____

Signature _____ Date _____

Office Use Only

<i>Secondary</i>	Address:	Distance:
<i>Elementary</i>	Address:	Distance:
<i>Kindergarten</i>	Address:	Distance:
<i>Pre School</i>	Address:	Distance:

Transportation Supervisor Signature _____ Date _____

Mileage determined by distance to nearest bus stop or school, whichever is closest, less the 1.5 mile parent responsibility zone.

Payment will be made from date of transportation approval only.