

CSD CHELTENHAM SCHOOL DISTRICT

TRANSPORTATION OFFICE

2000 Ashbourne Road · Elkins Park, PA 19027-1100 · 215-886-9500 x 6018 · Fax: 215-881-6318

NON-PUBLIC TRANSPORTATION REGISTRATION

Date: _____

Student Name: _____

Address: _____

Phone Number: _____ Alternate Phone Number: _____

Email Address: _____

Gender: Male Female Birthdate: _____ Grade: _____

Attending School: _____

Last Attended School: _____

I verify that the above information is correct and truthful. I understand that if any of the above information is found to be false, the District may not have the duty to provide free transportation for the above-named student. I agree to notify the District immediately if any of the information provided on this form changes.

Name of Parent/Guardian (Please Print)

Signature of Parent/Guardian

Date

To be completed by CSD Representative:

Birth Certificate (Kindergarten Only)

Proof of Residency:

Deed/Settlement Sheet/Tax Bill OR Lease

Driver's License

Car Registration (only if you are submitting for mileage reimbursement)

Utility Bill

Signature of District Representative

Date

To be completed by CSD Transportation Office:

Student is eligible for: CSD Transportation Reimbursement

Student Number: _____

Bus Number: _____ Morning time: _____ Afternoon time: _____

Bus Stop: _____

Signature of Transportation Representative

Date