

2018/2019

PACIFIC GROVE UNIFIED SCHOOL DISTRICT
Application for Home-to-School Transportation

Information regarding bus routes can be obtained by calling the Transportation Dept. @ 646-6643 or at your school site.
If you wish to purchase a bus pass for your child/children, please complete the form below and return it with the appropriate fee to the Pacific Grove Unified School District, ATTN: Denise Engles, 435 Hillcrest Avenue, Pacific Grove, CA 93950, or return to your student's school office. Your bus pass will be returned to your MAILING address.

Table with 3 columns: Fee Type, 1 Student, 2 or more Students. Rows: Annual, 1 Semester.

Due to the clerical expense of processing bus fees, partial payments will not be accepted unless an emergency or special need situation exists. Exemptions will be granted based on the recommendation of the school principal with the approval of the Assistant Superintendent for Business Services.

\*I. Student and Fee Information: (\*Required Information) Non complete forms will delay the application process

Enter the afternoon (\*P.M.) return bus stop. Refer to Bus Routes at transportation.pgusd.org

Table with 6 columns: Student's Full Name, School/Stop, Grade, Fee, Total. Rows 1-4 for student entries and a final row for TOTAL.

\*II. \*Date TOTAL amount enclosed: \$ # \$
check cash

\*III.

\*Parent/Guardian Signature

\*Parent/Guardian (Print Name)

\*Address

\*Phone Home Work Cell

IF YOUR STUDENT IS RETURNED TO HIS/HER SCHOOL BY ONE OF OUR DRIVERS A TOTAL OF 5 TIMES THEY WILL BE REMOVED FROM THE BUS FOR THE REMAINDER OF THE SCHOOL YEAR

A T-K & KINDERGARTEN PARENT MUST BE PRESENT AT THEIR STUDENT'S HOME DROP OFF SPOT EVERY DAY

**2018/2019**  
**PACIFIC GROVE UNIFIED SCHOOL DISTRICT**  
 Application for **Free** Home-to-School Transportation

\_\_\_\_ Approved  
 \_\_\_\_ Denied

**Information regarding bus routes can be obtained by calling the Transportation Dept. @ 646-6643 or at your school site.**  
 To apply for **free** home-to-school transportation, you must complete and sign the following application. Applications should be returned to: **Pacific Grove Unified School District, ATTN: Denise Engles, 435 Hillcrest Avenue, Pacific Grove, CA 93950, or to your student's school office. YOUR BUS PASS WILL BE RETURNED TO YOUR MAILING ADDRESS.**

**\*I.** I hereby apply for a **free** bus transportation pass for: Required Information: \*I,\*II,\*III,\*IV Must Completed  
 Enter the afternoon (\*P.M.) return bus stop. Refer to Bus Routes at transportation.pgusd.org

	Student's Full Name:	School: (check one per child)	Grade
1.		( ) Robert Down ( ) Forest Grove ( ) PGMS ( ) PGHS ( ) CHS *P.M. Bus Stop: _____	
2.		( ) Robert Down ( ) Forest Grove ( ) PGMS ( ) PGHS ( ) CHS *P.M. Bus Stop: _____	
3.		( ) Robert Down ( ) Forest Grove ( ) PGMS ( ) PGHS ( ) CHS *P.M. Bus Stop: _____	
4.		( ) Robert Down ( ) Forest Grove ( ) PGMS ( ) PGHS ( ) CHS *P.M. Bus Stop: _____	

**\*II.** \*I certify that we are qualified for a free bus pass for the following reason (check one):

	Description:	Identification #
( ) 1.	IEP with transportation requirement	
( ) 2.	<i>Intra</i> -District Transfer ( ie: District required transfer, Gate, Band, etc.)	
( ) 3.	Food Stamp Eligibility	Food Stamp #:
( ) 4.	AFDC Recipient	AFDC #:
( ) 5.	Family income is at or below one of the levels listed below:	

**\*III.**

Total number of family living in household	#:
Total family income (include wages of all working household members plus welfare, etc.)	\$

<b><u>INCOME ELIGIBILITY GUIDELINES</u></b>			
July 1, 2018 - June 30, 2019			
Household Size	<u>Weekly</u>	<u>Monthly</u>	<u>Annually</u>
1*	\$432	\$1,872	\$22,459
2	586	2,538	30,451
3	740	3,204	38,443
4	893	3,870	46,435
5	1,047	4,536	54,427
6	1,201	5,202	62,419
7	1,355	5,868	70,411
8**	1,508	6,534	78,403
* A household of one (1) means a foster child, an institutionalized child, or a pupil who is his/her sole support.			
**For each additional household member add:			
	+\$154	+\$666	+\$7,992

**\*IV.** I certify that the above information is true and agree to provide appropriate documentation if requested.

\_\_\_\_\_  
 \*Parent/Guardian Signature

\_\_\_\_\_  
 \*Parent/Guardian (Print Name)

\_\_\_\_\_  
 \*Address

\_\_\_\_\_  
 \*Phone \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Home Work Cell

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