

To ID.....(by office)  
 The Principal  
 St.Vivekanand Millennium School  
 HMT Township  
 Pinjore

**Subject : AVAILING THE SCHOOL BUS FACILITY for Session 20.....--.....**

Sir / Madam,

I understand that Bus Facility is a privilege. I wish to avail the school bus facility for my ward from month..... Kindly arrange the same. The particulars of my ward are as follows:-

Name of the student..... Class .....

Roll No. .... Adm. No. ....

Father's Name..... Mother's Name.....

Address .....

Telephone No. Office ..... (Resi.) .....

Mobile Nos. (Father) .....Mother.....

Bus Stop .....

My ward was availing school bus facility for the previous session : Yes  No

**I Here By Affirm That:-**

1. I shall abide by the rules and regulation laid by the school management regarding school transport.
2. I take responsibility to leave and receive my child at the mentioned bus stop on scheduled time.
3. I shall pay the Bus Maintenance Charges by scheduled date.
4. I understand that bus facility once availed cannot be withdrawn during that session.
5. I want to avail the bus facility for my ward at my own risk and responsibility.
6. In case of any changes in the address (that will lead to change of stoppage) and mobile numbers, I will intimate the school in written.
7. In case of any trips and tours, I will pay the charges other than the Bus Maintenance Charges.

Place.....

Yours faithfully

Date.....

Signature of Transport Incharge

Signature of Parent

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