



DELHI PUBLIC SCHOOL, DIMAPUR
APPLICATION FORM FOR TRANSPORT FACILITY

APPLICANT'S PARTICULARS

1. Name: _____
2. Class: _____ Section: _____ Adm No.: _____
3. Father's Name: _____
4. Address: _____
5. Phone No. : _____ (R) _____ (O)
6. Mobile No. _____ (Father) _____ (Mother)

APPLICATION DETAILS

FOR AVAILING SCHOOL TRANSPORT:

Please allow my child/ward mentioned above to avail transportation facility provided by the school with effect from _____

Bus no. _____ bus stop _____ would suit my child/ward. I hereby agree to pay all charges to the school for providing the said facility.

FOR CHANGE OF BUS STOP/ BUS ROUTE:

Please allow my child/ward to change the bus no. _____ and bus stop _____ to bus no _____ and bus stop _____ as _____

(Please cite the reason clearly)

FOR WITHDRAWAL OF TRANSPORT FACILITY:

My child/ward is using bus no. _____ bus stop _____ please cancel the transport facility with effect from _____ (This date should be the end of month).

Transportation fee has been paid till the month of _____.

Date _____

Signature of Parent

Remarks by the Principal: _____

Signature of the Principal