



**SCITUATE PUBLIC SCHOOLS
APPLICATION FOR TRANSPORTATION
2011-2012**

Payment due June 10, 2011

*** For School Use Only***			
Date			
Received			
Stamp			
Check #:		Unibank:	
Amount:		Amount:	
Date:		Processed:	

Scituate Public Schools offers a fee-based transportation program. The transportation fee for the 2011-2012 school year is \$240 per student, with a family cap of \$460. **Payment is due no later than June 10th; payment received after July 15th will be \$265 for an individual student, \$485 per family.** The fee is applicable to parents or guardians of students wishing to participate in the transportation program who match the following criteria:

- **ELEMENTARY:** All Scituate elementary school students (grades K-6) who reside less than or equal to two miles from their designated school. NOTE: Students in grades K-6 who reside greater than two miles from their school are not subject to the transportation fee. *A list of streets indicating whether your address is in a "fee zone" or in a "no fee zone" is attached and will be available at each of the elementary schools and on the Scituate Public Schools website at the Transportation Information Center at www.scituate.k12.ma.us.*
- **GATES:** All Gates Intermediate School students (grades 7-8);
- **HIGH SCHOOL:** All Scituate High School students (grades 9-12).

Please return the completed application and payment in full **NO LATER THAN JUNE 10, 2011** to the Transportation Office at: Scituate Public Schools, 606 Chief Justice Cushing Highway, Scituate, MA 02066. Checks should be made payable to **Town of Scituate**, or you can pay through our online electronic payment option **after** May 15, 2011 at the Scituate Public Schools website at www.scituate.k12.ma.us. **The Transportation office cannot guarantee transportation for applications received after this date.**

I am the parent or guardian of a student(s) who requires transportation from Scituate Public Schools.

Parent's Name: _____ Address: _____

Primary Phone: (____) _____ - _____ Secondary Phone: (____) _____ - _____

E-mail address: _____

STUDENT INFORMATION			Payment Method (Check One)		
Student's Name: _____	School: _____	Grade _____	<input type="checkbox"/> Check	<input type="checkbox"/> On-line	<input type="checkbox"/> No Fee
Student's Name: _____	School: _____	Grade _____	<input type="checkbox"/> Check	<input type="checkbox"/> On-line	<input type="checkbox"/> No Fee
Student's Name: _____	School: _____	Grade _____	<input type="checkbox"/> Check	<input type="checkbox"/> On-line	<input type="checkbox"/> No Fee
Student's Name: _____	School: _____	Grade _____	<input type="checkbox"/> Check	<input type="checkbox"/> On-line	<input type="checkbox"/> No Fee
Student's Name: _____	School: _____	Grade _____	<input type="checkbox"/> Check	<input type="checkbox"/> On-line	<input type="checkbox"/> No Fee

Parent/Guardian Signature: _____ **Date:** _____