



Form 1000 - Request for Transportation Reimbursement

This form must be submitted to DeLaSalle by the parent or guardian for every student attending DeLaSalle for which reimbursement is requested. **This form must be submitted to the Main Office at DeLaSalle before September 11, 2015.**

To be eligible for reimbursement each of the following criteria must be met:

1. Student must live more than 2 miles from school.
2. Student is not offered transportation by the district of residence.
3. Student must be a resident of the district from which reimbursement is claimed.
4. Parent has submitted a signed request (Form 1000) to DeLaSalle at the beginning of the year.

If your student(s) are eligible according to the specifications listed above, you may use this form to apply for reimbursement. Reimbursement will not be made if this completed form is not on file in with DeLaSalle. Please complete, sign and return this form to the Main Office before September 11, 2015.

# _____ - _____	2015 – 2016	DeLaSalle High School
School District of Residence	School Year	School Attending

Parent/Guardian Name: _____

Street Address (where student(s) will be transported)

_____	_____	_____
City	State	Zip Code

<u>Students' Requesting Reimbursement</u>	<u>Grade</u>	<u>Method of Transport (mark one)</u>
1. _____	_____	__ DLS Bus __ Family Car __ Public Trans.
2. _____	_____	__ DLS Bus __ Family Car __ Public Trans.
3. _____	_____	__ DLS Bus __ Family Car __ Public Trans.
4. _____	_____	__ DLS Bus __ Family Car __ Public Trans.

I certify that the information provided here is accurate. I have read the eligibility requirements and agreed that the transportation I may be reimbursed for provides for the safety and well being of my student and that all requirements are being followed.

Parent's/Guardian's Signature: _____ Date: _____