

Conejo Valley Unified School District

1400 E. Janss Road
Thousand Oaks, CA 91362

January 20__

To Parent/Guardian:

The Home to School Transportation Application you completed in the fall will remain on file. You do not need to complete another. In order to enroll your child in this program for the second semester, and to reserve a seat on the bus from February through June, please complete the bottom portion of this letter and return with your check to the address below. Unless you indicate differently, your child's transportation will remain the same for the second semester. If you wish to change your service, you will need to complete a new application to show the change that you are requesting.

We now accept MasterCard and Visa.

FEE SCHEDULE

	<u>ROUND TRIP</u>	<u>A.M. ONLY</u>	<u>P.M. ONLY</u>
First student	\$190	\$100	\$100
Each Additional Student	\$170	\$95	\$95

If you pay in full for the semester, you do not need to complete any other form. However, if you choose the two-payment plan, you must complete the Two Payment Agreement and return with your first check. There is a \$10 processing charge per child for the two-payment plan.

Elementary students will receive a sticker to be placed over the expiration date on their current passes. All middle school students will need to go to the school office/student store (Colina) to receive their sticker for their bus pass for the second semester. **Passes must be validated between January 15-20. Students will be required to show this pass to the bus driver both morning and afternoon to ride the bus.** Replacement bus passes cost \$10.00, in addition to any fees for a new student identification card.

For those suffering financial hardship, the Board of Education has approved a free and reduced price transportation program. Verification of financial hardship must be submitted and approved. If you would like to receive an application for this program, have questions regarding eligibility, or desire any further information, please contact Janet Boland, 497-9511, Ext. 207.

Student's Full Name _____ _____ _____ _____	School _____ _____ _____ _____	Please review the rules for safe bus conduct with your child. Your signature below indicates that you agree that your child will abide by these rules and understand that should your child not comply, transportation may be denied. In this event, you will have the responsibility of arranging for transportation for your child. If you cannot locate your copy of the rules, there will be copies available in the school office.
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Check here if you are requesting a change

AM only ___ PM only ___ Round Trip ___

I understand that **there will be no refunds made for any reason except moving out of the area.**

Method of Payment: Check ___ Money Order ___ Visa ___ MasterCard ___

If Paying with Credit Card: Print Name of cardholder _____

Account Number: _____ Amount: _____ Exp. Date: _____ Zip Code: _____

Address: _____ Phone: _____

FAX 805-497-2581

SIGNATURE OF PARENT/GUARDIAN

DATE

**COMPLETE BOTTOM PORTION AND MAIL WITH PAYMENT TO: CONEJO VALLEY UNIFIED SCHOOL DISTRICT,
TRANSPORTATION DEPARTMENT, 1400 E. JANSS RD., THOUSAND OAKS, CA 91362. Revised 01/06/14**