



SREE NARAYANA CENTRAL SCHOOL
 (Senior Secondary Affiliated to CBSE, New Delhi, Code No.9683)
CHERUKUNNAM , THEKKEKARA P O, MAVELIKARA-690107
 Phone Number: 0479-2328807

Appln. Form No.

സ്കൂൾ ബസ്സിൽ യാത്രചെയ്യുന്നതിനുള്ള അപേക്ഷ

Application for Availing School Bus/Transportation Facility for Students

1. Name of pupil(s) (in BLOCK LETTERS, initials at the end) & Sex (Specify Standard, Division of the pupil in brackets) (വിദ്യാർത്ഥിയുടെ പേര്, ക്ലാസ്സ്, ഡിവിഷൻ)	(1)	Std.	Division
	(2)		
	(3)		
2. Name of parent or guardian and his relation to the pupil (രക്ഷിതാവിന്റെ പേര്)			
3. House Name (വീട്ടുപേര്)			
4. Ward (വാർഡ്) & Post Office (പോസ്റ്റ് ഓഫീസ്)			
5. Panchayat/Municipality. (പഞ്ചായത്ത്)			
6. Resident Taluk (താലൂക്ക്)			
7. Telephone Numbers of parents/guardian (ടെലഫോൺ നമ്പർ)		(Residence): Mobile:(1) (2)	
8. Boarding Place /Point* (ബസ്സിൽ കയറുന്ന സ്ഥലം)			
9. Whether a school bus is plying through the boarding place mentioned at 7 above. If yes, number/name of the Bus. (സ്കൂൾ ബസ്സ് ഈ സ്ഥലത്തുകൂടി പോകുന്നുണ്ടോ)			
10. Specify the adjacent main Junction/Bus stand (which can be a manageable embarking point) and the name/number of the Bus plying through. (തൊട്ടടുത്തുള്ള സ്കൂൾ ബസ്സ് പോകുന്ന ജംഗ്ഷന്റെ പേര്)			
11. Distance from the boarding point to the School in k.m. (സ്കൂളിലേക്കുള്ള ദൂരം)			
12. Whether the pupil is already using school bus service or newly applying for it. (കഴിഞ്ഞ വർഷം സ്കൂൾ ബസിൽ യാത്ര ചെയ്തിരുന്നോ?)			

*See list of boarding points.

I.....guardian ofdo hereby declare that the particulars entered in this form are true to the best of my knowledge and belief, and also that I have known that the bus facility will be allotted subject to availability of school bus in the route and the seating availability in it. I have no objection in arranging the boarding/disembarking of my ward from/in the near by bus stop point in the bus route at the time stipulated by the school authorities.

Station:

Date:

Signature of parent/guardian

FOR OFFICE USE ONLY

Alloted Bus Number:.....

Date.....

Boarding Point:..... Time:..... **Bus Fee/Month:**.....

Signature of Principal/Correspondent