



# Delhi Public School, Jalandhar

G.T. Road, Jalandhar – 144010, Phones: 2413436, 2413437

Fax: 2413436 E-mail: info@dpsjalandhar.in

## APPLICATION FORM FOR USING TRANSPORT

1. Admission No. (To be filled by office) \_\_\_\_\_
2. Class \_\_\_\_\_
3. Child's Name in full (Block Letters) \_\_\_\_\_
4. Father's Name (Block Letters) \_\_\_\_\_
5. Residential Address & Tel. No  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Route No. \_\_\_\_\_
7. Nearest Land Mark (Pickup Point) \_\_\_\_\_

- a) Address provided above shall remain valid for at least one quarter.
- b) Application for change of address should be submitted one-month in advance to the transport incharge on the school prescribed form. Subsequently, transport if required would be provided subject to availability of seats in the bus.
- c) No temporary change or adjustment in school transport will be entertained.
- d) The pickup point and dropping point of your ward will be decided by the school.
- e) Submit this form to the school on the stipulated date. The school shall not be responsible for providing transport, if this form is not submitted on time.

Date \_\_\_\_\_

Parents Signature

**(To be filled in by the Transport Dept.)**

Adm. No. \_\_\_\_\_ Name of the child \_\_\_\_\_ Class / Sec \_\_\_\_\_

Route No. Allotted \_\_\_\_\_ Fee to be charged \_\_\_\_\_

Date \_\_\_\_\_

Signature of Transport Incharge