

**SADHU VASWANI INTERNATIONAL SCHOOL FOR GIRLS**  
**APPLICATION FOR TRANSPORT FACILITY**

Date : \_\_\_\_\_

Student's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Class: \_\_\_\_\_ Section: \_\_\_\_\_ Admn. No.: \_\_\_\_\_

\* Tick the appropriate –

\* **Required Route No : SV-** \_\_\_\_\_ w.e.f. \_\_\_\_\_ (date)

\* **Change of Route:** From SV- \_\_\_\_\_ To SV- \_\_\_\_\_ w.e.f. \_\_\_\_\_ (date)

\* **Withdrawal of bus facility :** Route No SV- \_\_\_\_\_ w.e.f. \_\_\_\_\_ (date),

Designated **bus stop:** \_\_\_\_\_

Res. **Address:** \_\_\_\_\_

Phone No.:(R) \_\_\_\_\_ (O) \_\_\_\_\_ (M) \_\_\_\_\_

\* **Mobile Number for GPS Tracker** \_\_\_\_\_ (GPS is compatible only with android application)

Parent's Signature \_\_\_\_\_

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**Please Note:**

- Request for creating a new bus stop will not be acceded to
- Students are required to travel only in the assigned bus route and they will not be allowed to travel in other route.
- Request for change of bus route will not be acceded to till there is a vacancy in that route.
- Withdrawal of bus facility in last quarter of the session will not be allowed.

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**OFFICE USE ONLY**

**For Information**

- |   |   |                               |
|---|---|-------------------------------|
| 1. Signature of Class Teacher               | : | _____                         |
| 2. Signature of Route In-charge             | : | _____                         |
| 3. Signature of Accounts Officer            | : | _____                         |
| 4. Signature of Bus Mother                  | : | _____                         |
| 5. Remarks of Transport-in-charge           | : | Slab – 1 / Slab – 2 / Slab -3 |
| Existing Number of Children                 | : | _____                         |
| Total No of Children including this child : | : | _____                         |

Signature

Permission Granted/Not Granted

**(Principal)**