NEW JERSEY STATE DEPARTMENT OF EDUCATION Office of Student Transportation SCHOOL YEAR 2014-2015

## (B6T) APPLICATION FOR PRIVATE SCHOOL TRASPORTATION Please submit a separate application for each child to the private school Resident District Board of Education

STUDENT NAMEFirs	st Last, Middle	Gender DATE OF BIRTH month day year
PARENT OR GUARDIAN	· ·	DAYTIME PHONE ()
HOME ADDRESS	E City	Zip MAILING ADDRESS
	reet City	•
		PHONE ()
	DATE SCHOOL C	
DISTANCE FROM YOUR HOME T	O SCHOOL	(measure via shortest public roadway or walkway in miles and tenths)
NAME AND ADDRESS OF LAST SO	CHOOL ATTENDANCE	57%
DATE		URE
NEW JERSEY STATE DEPART Div. of finance/ bureau of pupil to	MENT OF EDUCATION  fransportation  Complete two copies for each eligible st	B7T) REQUEST FOR PAYMENT OF TRANSPORTATION AID PRIVATE SCHOOL STUDENT mident. One for each semester.
	do hereby certify t	hat, who resides a, who resides a
(Parent/Guardian		
	has b	neen transported toName of Nonprofit School
-r4501		
Situated inCity	State	month day year month day year
	and at a second of two nanovtation air	d pursuant to NISA 18A · 39-1 I do solemnly declare and certify under
the penalties of the law that this I	y request payment of transportation aid request for payment is correct in all it p shool district for the same period of tim	particulars, and I am not claiming reimbursement or receiving e.
the penalties of the law that this I	request for payment is correct in all it p	particulars, and I am not claiming reimbursement or receiving
the penalties of the law that this transportation from any other so	request for payment is correct in all it perhool district for the same period of tim	e.  Signature of Parent or Guardian
the penalties of the law that this transportation from any other so	request for payment is correct in all it perhool district for the same period of tim	e.
the penalties of the law that this transportation from any other so	request for payment is correct in all it perhool district for the same period of time	Signature of Parent or Guardian  (B7T) REQUEST FOR PAYMENT OF TRANSPORTATION AID PRIVATE SCHOOL STUDENT
the penalties of the law that this is transportation from any other so	request for payment is correct in all it perhool district for the same period of time	Signature of Parent or Guardian  Signature of Parent or Guardian  (B7T) REQUEST FOR PAYMENT OF TRANSPORTATION AID PRIVATE SCHOOL STUDENT tudent. One for each semester.
Date  Date  NEW JERSEY STATE DEPAR' Div. of finance/ bureau of pupil to	request for payment is correct in all it perhool district for the same period of time of the same period of the same period of time of the same period of	Signature of Parent or Guardian  Signature of Parent or Guardian  (B7T) REQUEST FOR PAYMENT OF TRANSPORTATION AID PRIVATE SCHOOL STUDENT tudent. One for each semester.
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Date  Date  PREW JERSEY STATE DEPAR Div. of finance/ bureau of pupil to (Parent/Guardian)	request for payment is correct in all it perhool district for the same period of time of the same period of the same p	Signature of Parent or Guardian  Signature of Parent or Guardian  (B7T) REQUEST FOR PAYMENT OF TRANSPORTATION AID PRIVATE SCHOOL STUDENT tudent. One for each semester.
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Date  Date  Date  POPPE	request for payment is correct in all it perhool district for the same period of time.  OPPOPOPOPOPOPOPOPOPOPOPOPOPOPOPOPOPOP	Signature of Parent or Guardian  Signature of Parent or Guardian  (B7) POPP POPP POPP POPP POPP POPP POPP PO
Date  Date  Date  Parent/Guardian  City  In consideration thereof, I hereb the penalties of the law that this is transportation from any other so	request for payment is correct in all it perhool district for the same period of time.  TMENT OF EDUCATION  Complete two copies for each eligible state.  do hereby certify in has ess	Signature of Parent or Guardian  Signature of Parent or Guardian  BT P P P P P P P P P P P P P P P P P P P
Date  Date  Date  Parent/Guardian  City  In consideration thereof, I hereb the penalties of the law that this is transportation from any other so	request for payment is correct in all it perhool district for the same period of time and of	Signature of Parent or Guardian  Signature of Parent or Guardian  (B7) PPP PPP PPP PPP PPP PPP PPP PPP PPP P

MAY PAY TRASPORTATION AID BASED ON THIS CLAIM PURSUANT TO NJSA 18A: 39-1 AND 18A: 19

PARENTS MUST FILL OUT ALL THREE SECTIONS