SRDAV PUBLIC SCHOOL, DAYANAND VIHAR, DELHI -92

SCHOOL TRANSPORT FORM 2027-28

P.S. : ***Transport facility is available only on existing routes. Route / stops will not be changed to suit individual needs. Eleven months fee is charged. Fee for the month of June will not be charged. Withdrawal of transport facility in between the session is not allowed.***

Student Name:_____Admn. No._____

Class & Sec: _____ Father/ Mother Name: _____

Address:_____

Mobile No. : Father: _____ Mother : _____

Bus No. & Name of Stop for Nursery Wing (Class Preschool – I)

_____

Bus No. & Name of Stop for Primary Wing (Class II – V)

_____

Bus No. & Name of Stop for Senior Wing (Class VI – XII)

_____

I hereby agree to the terms and conditions of school transport & also undertake that I will not withdraw bus facility of my ward in the middle of the session. I agree to pay transport fee for eleven months. The fee will be paid timely along with monthly school fee before 10th of every month.

Date : _____ Sign of Parent: _____

FOR OFFICE USE

Admission No. : _____ ***Bus No. Granted:*** _____

Signature of Transport Incharge : _____ ***Date :***_____