

Managed by DAV College Managing Committee, New Delhi

## **Application form for Transport Users**

Regist	ration No		Please affix
Admis	sion No		a recent color
Session			photograph of the child
Name	of the child:		
Father	Name :		
Class	& Section:		
Reside Addre			
Con	tact No. :(Emergency No.)		
1.	We will pay according to the school transport rate.		
2.	We understand that it would be our responsibility to drop and pick-up o stop.	ur child at/from th	ne specified bus
3.	We accept that the bus facility is extended to our ward at our own risk a	• •	School will not
	be held responsible for any mishappening, if occurs during transportation		
4. 5.	We understand that ward will be allowed to travel in the bus only if seat is We understand that school has right to withdraw the bus facility at any		
•	have no objection to it.	·····	
6.	falling which you may be asked to deposit one month transportation	-	
7.	respective route. In case, you intend to avail bus facility in the mid of session, fee accord charged from July onward.	ling to the specif	ied route will be
8.	We have read and do hereby consent to the terms and conditions regarding	ng transportation.	
	e have gone through the rules & regulation with regards to school transpaughter whose particulars are given above may be permitted to use the sch Route No to DA on permitted existing routes by school	ool bus for his / l	
(Signa	ature of Parent(s) / Guardian)		
Nam	e:		
	Remark by Transport Incharge		
Rou	te NoBus Stop		
(Signa	ture of Transport Incharge)		