Name_____ Transportation Options & Reimbursement Form: Harbor City, District 4085-Please Circle Option 1, 2 or 3

Please **CIRCLE ONE** of the following 3 options for transportation:

Option 1: Bus Pass-Students receive a DTA business pass-one each semester

Students living within ISD 709 receive a school supplied DTA bus pass at student orientation. Pass replacement is \$2.00. **Please report lost or damaged passes to the school office immediately so they can be cancelled or replaced.** Students living outside of 709 can get a bus pass but then they can't collect mileage reimbursement.

Students who bus/bike to school must park bikes outside of the school, parking available under 4^{th} W. ramp.

Option 2: Parking Reimbursement

Student chooses to drive to school and have parking costs reimbursed to a *maximum* of **\$20.00** per month. Student is responsible for contracting with the parking lot. Reimbursement request must include a copy of the receipt from the parking facility.

Reimbursement Month:

Attach copy of receipt to this form; thank you.

Option 3: Mileage Reimbursement

Student lives **outside** of the ISD 709 district and drives to school. Mileage reimbursement rate of \$0.15/mile will be paid based on the mileage from the home address to the ISD 709 border. *Maximum* reimbursement is **\$37.50**/month. Each student is eligible for reimbursement in the case of siblings traveling together. The office will verify the mileage to the ISD 709 border based on your address. Reimbursement Month: Family's Address:

Distance from home to ISD 709	X 2	X \$0.15	X days	=	Reimbursement
border	(roundtrip)	Λ ψ0.15	attended	_	(maximum \$37.50)
	X 2	X \$0.15		=	

For example, if a student lives 20 miles from the ISD 709 border, round trip mileage would be 40 miles x \$ 0.15 = \$6.0 times number of days attending school to a maximum reimbursement of \$37.50 per month.

(Please Print)				
Student's Name:				
I certify that all information provided above is true and correct and that misrepresentations of				
information may prohib	it the student from receiving further funds for transportation.			
Parent/Guardian signature and date				
Printed Name:				
Address:				