

No. :

### APPLICATION FOR BUS PASS: 2023 - 2024

1. NAME OF THE STUDENT :  
(IN CAPITAL LETTERS)


2. Course: \_\_\_\_\_ I PUC / II PUC

3. Father's / Mother's Name : \_\_\_\_\_

4. Address : \_\_\_\_\_

Mobile: \_\_\_\_\_ (Res.) Tel No. : \_\_\_\_\_

(Off.) Tel No. : \_\_\_\_\_

5. Pick-up Point Name

Distance A ☐ B ☐ C ☐ D ☐ E ☐

7. Pick-up Point No.

Challan No.	Date	Amount

8. Blood Group :

***\*Please see overleaf for details***

#### DECLARATION

I declare that I have read the rules and regulations governing utilisation of bus facility and have accepted the same. I shall abide by them strictly. Kindly provide bus facility for my ward / myself.

Date : \_\_\_\_\_ (Signature)

TRANSPORT DEPARTMENT

Verified Challan No. \_\_\_\_\_ Date: \_\_\_\_\_ Amount \_\_\_\_\_

Pick-up Point No.

Distance A ☐ B ☐ C ☐ D ☐ E ☐

Transport Manager

ACCOUNTS DEPARTMENT

Verified the above details and records are updated

Date : \_\_\_\_\_ HOD ACCOUNTS

RECEIVED THE BUS PASS

Name : \_\_\_\_\_ Course: \_\_\_\_\_ Section: \_\_\_\_\_

Language : \_\_\_\_\_ Signature : \_\_\_\_\_ Date : \_\_\_\_\_