



**SCHOOL DISTRICT NO. 67 (OKANAGAN SKAHA)**

425 Jermyn Avenue, Penticton, British Columbia V2A 1Z4

**ACCOUNTS PAYABLE**

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**TRANSPORTATION ASSISTANCE APPLICATION FORM**

**STUDENTS NAME:** \_\_\_\_\_

**AGE:** \_\_\_\_\_

**GRADE:** \_\_\_\_\_

**SCHOOL:** \_\_\_\_\_

**KILOMETRES ONE WAY** \_\_\_\_\_

**STARTING DATE:** \_\_\_\_\_

**REASON FOR APPLICATION:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PARENT OR GUARDIAN:** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**POSTAL CODE:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE**

**APPROVED:** \_\_\_\_\_  
Director of Finance

**KM PER DAY:** \_\_\_\_\_

**RATE:** \_\_\_\_\_