

TRANSPORT DISCONTINUATION FORM



Name of School _____

Name of the child

ID Number Class Section Bus Number

Address

Transport service to be discontinued from (Date) To (Date)

Reason

Signature of the parent with name

Telephone: Office Mobile Residence.....

FOR OFFICE USE ONLY

Recommendation of Admin. Officer / Rep of BBT :

Approval of BBT - Representative :

Copy :

Accounts Officer – BBT

Manager - BBT

ACKNOWLEDGEMENT

Received application for discontinuation of transport service for –

Name School :

ID Number Effective Date

Signature of Admin. Officer / Rep of BBT

- NOTE:**
- a) Transport fee is charged and to be paid for a term.
 - b) No partial withdrawal during a term is permissible except on long absence from school which is to be certified by the Head of School.
 - c) Discontinuation of transport facility in the ensuing term is to be intimated in this form at least two weeks before the end of the term.
 - d) In case of discontinuation due to transfer from school or any other reason during the term at least two weeks notice to be given to the Administrator in this form. A copy of the transfer certificate shall be handed over to the Branch Manager - BBT who will give clearance. The fee shall be paid till the month the student leaves the school. If the payment is done for the full year or term refund will be done for the succeeding months.