

School Bus Application Form

Date: _____

Student ID No: _____ Class: _____

Child's name: _____, _____, _____
Last name First name Middle name

I would like my child to use school bus from _____, _____, _____
Date Month Year

Please circle: to school / from school / both ways

Bus Stop: Please select the bus stop listed below.

First Choice : _____ Second Choice: _____

Chiba Chuo	Nishi-Funabashi	Motoyawata	Mihama Higashi Danchi
Nishi-Chiba	Funabashi Station North Exit	Myoden	Umikaze no Machi
JR Chiba	JR Tsudanuma	Minami Gyotoku	Mihama Utase Elementary School
Inage	Keisei Tsudanuma	Urayasu	Utase Elementary School
	Makuhari Hongo		

Contact Phone Number: _____ Name: _____ Number: _____
 (In case of a bus delay)

NOTICE:

- *Your child will be placed on the waiting list if there is no space available when you apply.
- *The bus fee will be paid in full amount regardless of the type of journey made (one or both ways).
- *For any changes including cancellation, please contact the office through suitable forms.
- *A strict bus schedule will be observed. The bus will leave the bus stop without your child if you or your child shows up late at the bus stop.
- *The school may refuse your child access to the school bus if your child continually exhibits poor behavior on the bus. Please see the Bus Rules on the MIS website Parents_Transportation page.