



# SCHOOL BUS APPLICATION

Pupil's name		Year group	Starting date for bus service
Inbound Bus Route #		Bus Stop #	
Outbound Bus Route #		Bus Stop #	

Pupil's name		Year group	Starting date for bus service
Inbound Bus Route #		Bus Stop #	
Outbound Bus Route #		Bus Stop #	

Emergency contact			
The information you provide is very important to school bus operations. Please make sure it is accurate.			
Guardian's name		Guardian's mobile	
Father's mobile		Mother's mobile	

## Walk home alone application (only applicable for pupils of Year 5 and above)

Parents of Year 5 and above pupils who can not pick up/drop off the pupil from school bus stop can choose to apply for pupils walking home alone, please read the following statement carefully and tick the box.

I would apply for my child(ren) to walk to school bus stop/residence by himself and I am responsible for the safety of my child(ren) from the residence to the pick-up stop in the morning (inclusive of the time waiting for the bus at the bus stop) and from the drop-off stop to the residence in the afternoon. I fully understand and confirm that my child(ren) can go from residence to the pick-up stop alone to get on the School Bus, or from drop-off stop to residence alone to go home. I have ensured sufficient safety protection. I am fully responsible for any and all safety issues on the way and while waiting, and my child(ren)'s safety responsibilities are irrelevant to the school and/or teachers.

The following information is required in the event of your child needing medical assistance.

Does your child have car sickness or chronic illness? Yes  No

If Yes, please give details:

\* The College does not recommend pupils have car sickness to take the School Bus.

Parents' signature	Date
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