



WELLINGTON COLLEGE  
INTERNATIONAL  
SHANGHAI

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# SCHOOL BUS APPLICATION

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Child's name	Year group	Starting date for bus service

Home address

**Emergency contact numbers**  
The emergency contact numbers you provide are very important for school bus operations. Please fill in accurately.

Home		Guardian's mobile	
Father's mobile		Mother's mobile	
Father's email			
Mother's email			

I give permission for my child, to walk home alone after being dropped off (only applicable for pupils of year 6 and above).

Yes  No

I have read and understood the School Bus Regulation on the school website.

Parents' / Guardians' signature

Date

Note: We cannot guarantee that the school bus service will be available at your home address.

<b>Internal use only</b>			
This bus stop can be arranged 线路站点是否能够安排		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If not, reasons 原因			
Signed by bus company			
To finance for billing	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date

