

**Florham Park Public Schools  
2008/2009 Transportation Request**

\_\_\_\_\_ We are requesting Subscription Pupil Transportation for SY 2008/2009 (fee enclosed)

\_\_\_\_\_ We are eligible for transportation according to NJSA 18A:39-1

\_\_\_\_\_ We are eligible for transportation as part of my child's IEP

Name of Parent/Guardian: \_\_\_\_\_

Emergency Phone # : \_\_\_\_\_

Street address: \_\_\_\_\_

	Name of child	School	Grade
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

Amount enclosed \_\_\_\_\_ (\$600.00 per student, \$300.00 each additional student)

**Payment must accompany form for Subscription Busing**

**Please make check payable to: Florham Park Board of Education**

*Return form and check to:  
Florham Park Board of Education  
PO Box 39  
Florham Park, NJ 07932*