



American International School



ATHENA EDUCATION
For Social Grace

Bus Cancellation Form

Date _____

For Parents

| Sr. No. | Students ID/EN | Student Name | Grade | Section |
|---------|----------------|--------------|-------|---------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |

Bus No _____ *Stop Transport with effect from Date _____

* Reason for Cancellation _____

In case of student's withdrawal during the term from the school bus, The transportation refund fees will be calculated as per the MOE Bylaw. I have read and understood Term & Conditions related to the school transport and confirm my acceptance

Parent's Name and Signature _____

Mobile No. _____

For Office Use Only

Request Received Date _____ Request approved date by Transport Head _____

Start Service Date _____ Stop Transport with effect from Date _____

Assistant Name: _____ Signature: _____

Transportation Head comment: _____

Transportation Head signature: _____