

## **SCHOOL TRANSPORT APPLICATION Basic education**

Return address: Sivistyshallinto Toimistosihteeri Paula Lahtinen PL 113 **26101 RAUMA** (Visiting address: Kanalinranta 3)

The form applies for free school transport (school transport benefit). The application/

	decision concerns the st	tudent's address in the population register given in this application.  her factor affecting the interest) changes, the application must be
	-	t decision is positive, cision via Wilma vill suffice  Yes  No
	Negative decisions (with instructions on how to appeal) will always be sent by post.	
Student's information Name		Date of birth
Name		Duce of bird!
Home address		Postal code and place
School (present)	Class*	School, where the transport application is to be applied for (if not the same as the current one)
Trip to school (one-way, km)	Transportation is requested for this period of time**	
	*in time of a	applying **school year or dates
Reasons for applying a transporta		applying School year of dates
Trip to school over 3 km (1-2 gr)		gers of the trip
Trip to school over 5 km	Decision on special support	
Accident in school	Starting class	
Accident in school  Accident in free time	Expert opinion	
	Other justification, which	
Medical certificate	∐ Ouner jus	strication, which
(Medical certificate attached for illness and accident)		
Haettava kuljetustapa		
Bus		
☐ Taxi		
Other mode of transportation, wh	hich	
More information in the application  More information	<u>)n</u>	
Tiole III o II		
Signature		
Place and date	Guardian's	signature
Phone number	Printed name	e
E-mail address		