(B7T) REQUEST FOR PAYMENT OF TRANSPORTATION AID - PRIVATE SCHOOL STUDENT

This request shall be filed by the parent or guardian of eligible nonpublic school students with the secretary of the local school district for the first and second semesters upon request. This request must be filed prior to the end of the fiscal year (N.J.A.C. 6A:27-2.1(c)).

I, _______________________, (Parent or Guardian) do hereby certify that _______________________, (Name of Student) who resides at _______________________, (Address of Student) is eligible for transportation aid as follows:

Nonprofit Private School: _______________________, (Nonprofit Private School) situated in _______________________, (City) _______________________, (State)

not more than 20 miles from the residence of the student for the period of time from Month ___ Day ___ Year ___ to Month ___ Day ___ Year ___, In consideration thereof, I hereby request payment of transportation aid pursuant to N.J.S.A. 18A:39-1.

I do solemnly declare and certify under the penalties of the law that this request for payment is correct in all its particulars, and that I am not claiming reimbursement or receiving transportation from any other school district for the same period of time.

_________________________ (Date) _________________ (Signature of Parent or Guardian)