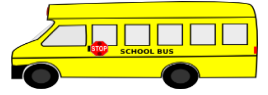




# AL SARAYA BUSES RENTAL LLC



## Transport Form

School Academic Year \_\_\_\_\_ Admission No. \_\_\_\_\_ Date: \_\_\_\_\_  
 Name of the student \_\_\_\_\_ Grade \_\_\_\_\_ Division \_\_\_\_\_

**Please provide the exact location for new transport: (NEW TRANSPORT REQUEST)**

Confirmed Date of Entry \_\_\_\_\_ Emirates \_\_\_\_\_  
 Pick-up / Drop- off Point \_\_\_\_\_  
 Address: \_\_\_\_\_

*Note:- Only limited areas are covered, kindly visit Al Saraya website for more information - www.alsaraya.ae*

**Please provide the details if change of residence and bus routes: (BUS OR STOP CHANGE REQUEST)**

Old Bus Route No. _____	New Bus Route No. _____
Old Bus Stop: _____	New Bus Stop: _____
Old Location: _____	New Location: _____

*Note:- One month prior notice required for any route change and administrative charge AED 100/- to be paid (Subject to seat and bus availability)*

**Please fill the details for transport cancellation: (TRANSPORT CANCELLATION REQUEST)**

Bus Route No. \_\_\_\_\_ Bus Route Name (Area) \_\_\_\_\_  
 Notice Date \_\_\_\_\_ Cancellation with effect from \_\_\_\_\_  
 Reason for cancellation \_\_\_\_\_

*Note:- Request for discontinuation of transport facility must be submitted THREE MONTHS in advance to the Al Saraya office. If the bus usages are discontinued without written notice, then it will be deemed that the student continues to use the bus services, irrespective of actual usage. This also applies to the fee defaulter of that particular term.*

### Terms and conditions of school bus service:

I have read and understood the Terms & Conditions related to the school bus logistics and confirm my acceptance.

Parent's Signature & Date \_\_\_\_\_ Mobile Number \_\_\_\_\_

### For Transport Department office use only:

<input type="checkbox"/> New Transport	<input type="checkbox"/> Route Change	<input type="checkbox"/> Stop Change	<input type="checkbox"/> Transport Cancellation - OT / TC
Bus Route Name: _____			
Bus Stop Name: _____			
Bus Route No. _____	Bus Stop Code : _____		
With effect from _____	Area Code : _____	Authorised Signature & Date _____	

For Accounts Department Office use only:		For CLP Department Office use only:	
Application received date _____ / _____ / _____		Application received date _____	
Bus Fees for Term ( √ ) _____ First / Second / Third		Student profile updated by _____	
Total Fees ( in AED) _____		RFID Issued Date _____	
Authorised Signature & Date (Accounts Department) _____		Authorised Signature & Date (CLP Department - School) _____	

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### Information slip for driver

Student's Name \_\_\_\_\_ Grade & Div \_\_\_\_\_ Admission No. \_\_\_\_\_  
 The above student has (Permission / Discontinue) to ride bus route no # \_\_\_\_\_ for \_\_\_\_\_ day(s)  
 Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_ Reason: \_\_\_\_\_  
 Destination (Stop Name) \_\_\_\_\_ Authorised Signature: \_\_\_\_\_  
*This pass must be shown to bus driver upon entering bus.* Date: \_\_\_\_\_