



**SCHOOL DISTRICT #22 (VERNON)**

**Transportation Department**

1401 – 15 Street Phone: (250) 549-9281  
Vernon, BC V1T 8S8 Fax: (250) 549-9200

**Request for Financial Assistance 2020-2021  
(Courtesy Rider)**

Families who require financial assistance can request support in two ways:

- A. A payment plan that extends past mid-August but no later than October 1.
- B. Full or partial fee waiver for families in extreme financial need.

This form, along with the school bus registration, is to be returned to the Transportation Department for consideration.

**Name of Student(s):**

1. \_\_\_\_\_  
Last Name (please print) First Name (please print)

3. \_\_\_\_\_  
Last Name (please print) First Name (please print)

2. \_\_\_\_\_  
Last Name (please print) First Name (please print)

4. \_\_\_\_\_  
Last Name (please print) First Name (please print)

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**Applicant (Parent/guardian):** I am applying for: A. Payment Plan  B. Partial Waiver  Full Waiver

\_\_\_\_\_  
Parent / Guardian (Please Print) Signature Date

**A. Payment plan that extends past mid-August with financial payment due Oct. 1, 2020.**

Payment plan for Transportation Fee:

Aug. 01 \$1/3 x \_\_\_\_\_ Paid  Oct. 01 \$1/3 x \_\_\_\_\_ Paid

Sept. 01 \$1/3 x \_\_\_\_\_ Paid

**B. Requests for a waiver will be considered on a case by case basis. All requests for a waiver (full or partial) must be supported by financial evidence indicating financial need (previous year's Income Tax Assessment). All financial documentation received will be inspected and securely destroyed.**

- Do you live with a spouse/partner/other adult : Yes  No  \_\_\_\_\_

If yes, you must attach a copy of that person's 2019 Income Tax Assessment.

- If a partial waiver was provided, what amount would you be able to afford? \$ \_\_\_\_\_ / child

**OFFICE USE ONLY**

2019 Income Tax document(s) provided: Yes  No  \_\_\_\_\_

Approved for: A. Payment Plan (details above)  B. Partial Waiver  \$ \_\_\_\_\_ Full Waiver  \$ \_\_\_\_\_

Additional Details: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_