



BERKELEY COUNTY PUBLIC SCHOOLS

401 S. Queen Street
Martinsburg, West Virginia

Request for Transportation Or in Lieu of Transportation Payments From Berkeley County Schools

Student's Name _____ Grade _____

School _____

Parent's Name _____

Address _____

Telephone _____

Exact Description of Location of Home _____

Signature of Parent _____

For Berkeley County Use

Transportation will be provided

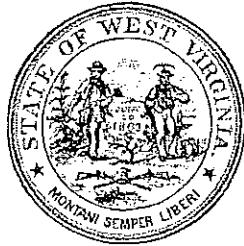
Description of Transportation _____

In Lieu of Transportation Approved

Date

Authorized Signature

PLEASE FILL OUT BOTH SIDES WITH ADDRESS



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401 S. Queen Street

Martinsburg, West Virginia

In Lieu Of Transportation
Payment Request

I, principal of Faith Christian Academy (school Name) verify that

_____ (Student's Name) was present for _____

days during the _____ (1st/2nd) Semester of the _____

school year.

Payment To:

_____ Parent's Name

_____ Address

_____ City, State, Zip

In the amount of \$.75 x _____ days = _____ Total

Has been approved by Berkeley County Board of Education

Principal's Signature _____ Date _____

(Please submit at the end of each semester only.)