

Modernage Public School & College, Abbottabad
Application for Change of Area of the School Transport



It is requested to Change the Area of the school transport for the under mentioned students of Modernage:

| Name/s of Student/s | Class/Section | Campus | New Pick up Point | New Drop off Point |
|---------------------|---------------|--------|-------------------|--------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

First date on which travel is required from new location: ____/____/____.

Name of Applicant: _____ Relationship with the Student/s: _____

Sign: _____ Date: _____

Copy for Bursar

Kindly note that following changes in the student/s's school transport w.e.f. (date/month):

_____. Please allot the new vehicle # and route to the below mentioned students:

| Admission No. | Name/s of Student/s | Class/Section | Campus | New Vehicle # | New Route allotted |
|---------------|---------------------|---------------|--------|---------------|--------------------|
| | 1. | | | | |
| | 2. | | | | |
| | 3. | | | | |

Transport In-Charge: _____

Dated: _____

Copy for Parents/Guardian

Kindly note that your application for Change of Area of School Transport has been approved for the following students:

| Name/s of Student/s | Class/Section | New Vehicle # allotted |
|---------------------|---------------|------------------------|
| 1. | | |
| 2. | | |
| 3. | | |

First date of travel from new location will be ____/____/____. Kindly feel free to contact the undersigned in case of any query.

Name & Mobile No. of Transport In-Charge

Sign of Transport In-Charge

Date