

NORTHWEST PUBLIC SCHOOLS

2710 N. North Road
Grand Island, NE 68803-1199
Bill Mowinkel, Superintendent: (308) 385-6398
Fax Number: (308) 385-6393

Student Transportation Reimbursement Form Enrollment Option Students- Free Lunch Eligible Updated 1/2008

Parents/guardians of K-8 students who have been authorized for mileage reimbursement must submit this form for payment. Payment of approved mileage will be made at the next regularly scheduled meeting of the Northwest Public Schools Board of Education. Approved mileage is defined as mileage from home to school, minus three miles. Please complete and sign the following form and return to:

**Northwest Public Schools
2710 N North Road
Grand Island, NE 68803-1199**

Student Name (s): _____

Parent Name _____ Phone _____

Transported From: _____ (Home Address)

To: _____ (Name of School)

Distance from school – 3 miles = _____ (Miles eligible per day)

Total number of day's transported _____ (Before December 31, 2007)

Total number of day's transported _____ (After January 1, 2008)

**Note: Reimbursement rate – Before December 31, 2007 - \$.691125 per mile
- After January 1, 2008 – \$.719625 per mile**

I hereby certify that this report is a true and correct report of miles driven in transporting the above children to and from school for the period _____ 20__ to _____ 20__.

Signature of Parent/Guardian

Date: _____

For Office Use Only

Miles per day _____
Days transported x _____
Total Miles _____
Rate x .691125 _____
Total _____

Miles per day _____
Days transported x _____
Total Miles _____
Rate x .719625 _____
Total _____
Total check: _____