

BUS REIMBURSEMENT INFORMATION

Date: November 3, 2017
To: PCHS Parents
From: Dan Van Kooten, PCHS Principal
Re: Transportation Reimbursement Request Form(s)

In order to receive your Non-Public Transportation Reimbursement the appropriate form (attached) must be completed and sent to your respective public school district by December 1.

The program requires the following:

1. Parents must complete the appropriate form and return it to the public school district office ASAP.
 - a. Fill out “Nonpublic Parent Reimbursement Form” if your student drives to school (This must be returned to your school district office by December 1, 2017.)
2. You are allowed to claim up to 3, K-8 students, and no more than 1 high school student
3. Make sure you sign and date the form.
4. That you act now! **Before the December 1, 2017 deadline.**

The completed form must be in the hands of the respective public school office ASAP. (Select the school district that applies to you.)

Montezuma Community School District
Attn: Transportation Director
504 N 4th St
Montezuma IA 50171

Knoxville School District
Attn: Transportation Director
309 W Main St
Knoxville IA 50138

*Newton Community School District
Attn: Gayle Isaac
700 N 4th Ave E Suite 300
Newton IA 50208
***Newton students should fill out form for both bus riders AND those who drive their own vehicle**

North Mahaska School District
Attn: Transportation Director
PO Box 89
New Sharon IA 50207

Twin Cedars High School
Attn: Brian Vander Sluis
2204 Hwy G-71
Bussey IA 50044

Tri-County School District
Attn: Transportation Director
3003 Hwy 22
Thornburg IA 50255

NONPUBLIC PARENT REIMBURSEMENT REQUEST FORM

Notice to Nonpublic Parents:

Iowa Code Section 285.1 requires public school districts to provide transportation services to resident nonpublic students that are entitled as per that section. How the transportation service will be provided is to be determined by the public school district. When funds are appropriated by the Iowa General Assembly **and** if your public school district has selected "Parent Reimbursement" as their transportation service type of choice **and** you meet the transportation entitlement policy provisions of the public school district in which you live **and** the nonpublic school being attended has been accredited by the Iowa Department of Education, you are entitled to parent reimbursement as per Iowa Code Sections 285.1, subparagraph 3 and 285.3.

(Iowa Code, Section 285.3) If your public school district selects the "Parent Reimbursement" option, it is your responsibility as the nonpublic parent or guardian to notify your resident public school district that you have children attending an accredited nonpublic school and its location.. In addition, specific information, as requested on this form, must be submitted by the nonpublic parent or guardian not later than **December 1st** (for first semester reimbursement) and **May 1st** (for second semester reimbursement), each year. Failure to submit this request by the above deadline each semester will result in the denial of the reimbursement request for the claim period.

NAME (Parent or Legal Guardian): _____

ADDRESS (of parent or legal guardian): _____

CITY: _____ STATE: _____ ZIP: _____

Is this the location (address) at which the nonpublic student(s) listed below now reside? **[Circle one: Yes No]**
(If "No", indicate beneath the name of each student listed below the address where each nonpublic student(s) lives.)

[Iowa Code, Section 285.1, subsection 3, limits the number of students that may be eligible for parent reimbursement to a maximum of three (3) elementary students and one (1) high school student per family.]

Name-Nonpublic <u>Elementary</u> Student(s) (Last, MI, First) (Maximum of 3 Elementary Students)	Age of Student	Grade Level (this year)	Name - Nonpublic School of Attendance	Distance between Std. Residence & Nonpublic School
1. Address:				Miles =
2. Address:				Miles =
3. Address:				Miles =

Name-Nonpublic <u>High School</u> Student (Last, MI, First) (Maximum of 1 High School)	Age of Student	Grade Level (this year)	Name - Nonpublic School of Attendance	Distance between Std. Residence & Nonpublic School
1. Address:				Miles =

I certify that the above information is accurate and that I am a parent or legal guardian of the above named nonpublic student(s). I also affirm that the nonpublic school(s) of attendance is/are accredited by the Iowa Department of Education.

Parent or Guardian Signature: _____ **Date:** _____

RETURN THIS FORM TO:
(Name and address of the resident public school district.)

For public school district use only:

Enter or Stamp Date Received Here:

Received by: