



# INDIVIDUAL TRANSPORTATION CONTRACT

TR-4 (03/2018)

School Year 2020 - 2021

Due to School Clerk June 1

Contract #

Elementary District Responsible for Reimbursing Contract	County	Legal Entity
High School or K-12 District Responsible for Reimbursing the Contract	County	Legal Entity

Is this a contract shared between elementary and high school?

Yes  No

Are you applying for isolation status?  Yes  No

(If yes, please attach explanation)

**Isolation:** Section 20-10-142, MCA provides for increased reimbursement rates for special circumstances of residence. In order to receive increased rates, individual circumstances must be reviewed and approved by the trustees of the district, the county transportation committee, and the Office of Public Instruction. (10.7.116 ARM provides guidelines for such.)

Check here only if increased payment due to isolation has been approved

Initials

Elem District Approval	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
HS District Approval	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
County District Approval	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Parent or Guardian Name:

Physical Address (street address only).

Distance from Home to nearest school (one way)

EL \_\_\_\_\_ HS/K12 \_\_\_\_\_

Distance from home to nearest bus stop, if any (one way)

EL \_\_\_\_\_ HS/K12 \_\_\_\_\_

Contract is for one-way only

Students in each grade level covered by this contract

	Pre-K	K	1-8	9-12
Total	Total	Total	Total	Total

Regular Trans				
Spec. Ed. Trans				
Room & Board				
Corespondence				
Reg. Contingency				
Spec. Ed. Contin.				

DEADLINES:

**PARENTS:** Due to School Clerk June 1

**CLERKS:** Send original to County Supt by July 1, retain a for your files

REIMBURSEMENT RATES  
determined by 20-10-142, MCA

EL	HS
----	----

Student Name	School	Grade
Student Name	School	Grade
Student Name	School	Grade
Student Name	School	Grade
<b>THIS CONTRACT IS FOR:</b>		
Grades K-12		
<input type="checkbox"/> 1st Semester Only	<input type="checkbox"/> 2nd Semester Only	<input type="checkbox"/> Both
Prekindergarten		
<input type="checkbox"/> 1st Semester Only	<input type="checkbox"/> 2nd Semester Only	<input type="checkbox"/> Both
<b>PREKINDERGARTEN</b>		
Prekindergarten child rides WITH other school age students also covered by this contract		
To or from Bus Stop	_____ times per day	_____ days per week
To or from School	_____ times per day	_____ days per week
Prekindergarten child rides WITHOUT other school-age students		
To or from Bus Stop	_____ times per day	_____ days per week
To or from School	_____ times per day	_____ days per week

Agreement between parent (parent name) \_\_\_\_\_, and school district (district name) \_\_\_\_\_  
County, hereinafter referred to as the District(s).

The parties agree as follows:

- The parent shall transport or provide transportation for the student(s) to and from the school or bus stop on the days when school is in session. The parent or guardian assures that a licensed and insured driver will transport the students. Mileage contracts are valid only when transportation for the distance reported on the contract actually occurs.
- In March and June, the District shall pay the parent the sum officially approved in the application upon certification by the teacher or principal of the school of the number of days the student(s) was transported for the past semester.
- The payment shall be computed on the basis of the schedule established in Section 20-10-142, MCA, and the information accompanying this contract.

**I attest the above information is true and correct**

Elementary School District	Chair, Board of Trustees	Date
High School district	Chair, Board of Trustees	Date
Signature - Parent or Guardian		Date
Address, City, Zip Code		Phone Number