

ZPass Application for Transportation Bus Service

For new transportation students only. If your child already has a LPSD-issued ZPass, this form is not required.

LPSD-38 * PO Box 40 * Monument, CO 80132 * Phone 719-488-4700 * Fax 719-488-4704 * Email: ZPass@lewispalmer.org

If your student is eligible for transportation, please complete and return this application with payment to the LPSD Administration Office (Attn: ZPass) at the address above. If you will be paying by credit card, you may submit this form electronically or by fax, and then log into the Infinite Campus Parent Portal and follow the Transportation links to make your online credit card payment. Once the application is processed, a ZPass will be issued to your child(ren) prior to the start of school. Please select one or more of the following options:

I'll purchase the annual pre-paid bus pass for \$150 per student (\$75 if my child is a half-day Kindergartner), \$450 family max.

I'll pay the initial bus fee deposit of \$25 per student which will be applied to each student's first 50 rides.

My payments will be reflected online via credit card – I will log into the Infinite Campus Parent Portal to make the payment.

My family will be covered by Free and Reduced Lunch and I request a waiver of transportation fees. *Note: If you qualify for Free & Reduced Lunch, please complete and submit your Application for Free & Reduced Price School Meals as soon as possible. Remember to give your permission on the reverse of that application to use the information to waive bus transportation fees.*

My student has an Individual Education Plan and uses specialized transportation which is provided as a related service (no fee).

My student resides outside the transport boundary for his or her school, but I'm requesting use of transportation services on a space available basis (Authorization for Transportation for Non-Transport Area Students is required, see Transportation website).

| Student's Last Name | Student's First Name | School | Grade | Amount Paid |
|----------------------|----------------------|--------|-------|-------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total Payment | | | | |

Parent/Guardian's Name(s) _____

Mailing Address _____

Student Address for Pick-up/Drop-off _____

Anticipated first day of Transportation _____ Primary Phone(s) _____

Special Circumstances _____

I do not have email access. Please contact me via a paper statement to be mailed to my mailing address listed above.

↓ **Please initial below to indicate that you have read and understand each item listed. Each item must be initialed.**

1. The District may cancel or deny my child's eligibility under this program for any misuse or misrepresentation of any facts or circumstances connected with participation in its benefits. The District may also deny eligibility due to failure to observe bus conduct rules.
2. Consequences for failure to pay transportation fees may result in loss of optional school privileges and withholding of official records.
3. I understand the cost of busing for field trips, band, choir and other school activities is billed separately from the ZPass.
4. I understand my account will be billed for a replacement ZPass in the amount of \$5 for the first card, and increasing by \$5 for each subsequent card. Further, I understand that if my child rides and does not use a ZPass, manual entries will be billed to my account. After three school days of manual entries, I will be billed for a replacement ZPass, as all students riding the bus must use a ZPass.

My signature indicates that I have read and understand all the above terms of the Application for Transportation Bus Service.

| | | |
|---|--|-------------|
| Signature By checking this box I am electronically signing this document and I assert I am the person named on the right. | Printed Name (electronic submission) or Signature | Date |
|---|--|-------------|

Please enclose a check or money order payable to Lewis-Palmer School District. You may combine bus fee payments on one check. If you are applying for Free & Reduced Lunch or will be paying by credit card, you may submit this form electronically.

Admin Use Only: F&R ___ IEP ___ PrePay ___ KHD ___ Cash ___ Check # ___ Credit ___ Amount ___ Date ___