NEW JERSEY STATE DEPARTMENT OF EDUCATION

Division of Finance
Office of Student Transportation

(B7T) REQUEST FOR PAYMENT OF TRANSPORTATION AID - PRIVATE SCHOOL STUDENT

This request shall be filed by the parent or guardian of eligible nonpublic school students with the secretary of the local school district for the first and second semesters upon request. This request must be filed prior to the end of the fiscal year (N.J.A.C. 6A:27-2.1(c)).

| I, | | do hereby certify that | | | | |
|-----------------------|-----------------------------------------------------------------------|-------------------------------|-------------------------|-------------------|--------------|--|
| , | (Parent or Guardian) | | | (Name of Student) | | |
| who resides at | (Address of | Student) | has been transported to | | | |
| | | situated in | | 781. | 75. | |
| | (Nonprofit Private School) | | | (City) | (State) | |
| not more than 20 mi | iles from the residence of the student | for the period of time from | Month | Day | Year | |
| to | . In consideration | n thereof, I hereby request p | payment of | transportation | aid pursuant | |
| to N.J.S.A. 18A:-39-1 | | | | | | |
| • | declare and certify under the pena I am not claiming reimbursement or | | • | | | |
| (Date) | | (Signature of Parent or C | Guardian) | | | |
| | EXECUTED, THIS FORM MAY BE A | | | | | |

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