



Autonomous College Permanently Affiliated to VTU, Approved by AICTE & UGC
Accredited by NAAC with 'A' Grade, Accredited by NBA
New Horizon Knowledge Park, Ring Road, Bellandur Post, Bengaluru 560 103

The Trust is a Recipient of prestigious Rajyotsava State Award 2012 conferred by the Government of Karnataka

APPLICATION FOR BUS PASS: 2022 - 2023

Affix
Stamp Size
Photo

No. :

1. NAME OF THE STUDENT :
(IN CAPITAL LETTERS)

2. Class _____ Section _____

3. Admission No.

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4. Blood Group :

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5. Father's Name : _____ Mobile : _____

6. Mother's Name : _____ Mobile : _____

7. Address : _____

_____ (Res.) Tel No. : _____

8. E-Mail : _____

9. Pick-up Point Name _____ Bus No: _____

10. Drop Point Name _____ Bus No: _____

11. Pick-up Point No. _____

12.

No.	Challan No.	Date	Amount

Please see overleaf for details

13. Distance A _____ B _____ C _____ D _____ E _____

DECLARATION

1) I declare that I have read the rules and regulations governing utilisation of bus facility and have accepted the same. I shall abide by them strictly. Kindly provide bus facility for my ward.

Date : _____ (Signature)

TRANSPORT DEPARTMENT

Verified Challan No. _____ Dated _____ Amount _____

Pick-up Point No. _____

Distance A _____ B _____ C _____ D _____ E _____

Transport Manager

ACCOUNTS DEPARTMENT

Verified the above details and records are updated

Date : _____ HOD ACCOUNTS

RECEIVED THE BUS PASS

Name : _____

Signature _____

Admn. No. : _____

Date _____