

**APPLICATION FOR TRANSPORTATION
OR MAINTENANCE OF ISOLATED PUPILS
2010-2011 School Year**

CAMPBELL COUNTY SCHOOL DISTRICT
1000 West Eighth Street
P O Box 3033
Gillette, WY 82717-3033
682-5171 Ext 4566
ATTN: Kathe Stevens

Parent/Guardian: Seth & Rosey Barber
 Mailing Address: 68 Taylor Rd City/Zip: Gillette WY 82716 Home Telephone: 307 682 2705
 Place of Employment: Stuckskin R. Coleman Field Services Work Telephone: R 682 3087
 EXACT Location of Residence: 68 Taylor Rd 20 miles north of Gillette on Hwy 14/16
 Months for which Isolation is Requested: Aug-May
 Bus Route student would normally ride: # 150
 Please choose one of the following: Private Transportation Room and Board Family Move

Name of Pupil	Grade	School	School Activity
Taylor Barber	10	Collis S. Smith	Football, Wrestling, Track
Keslyn Barber	8	Thorn	Volleyball, Basketball, Track, Band
Lane Barber	7	Thorn	Football, Wrestling, Track, Band

Only families choosing Private Transportation need to complete the following section
 Please complete only the column for "Miles Per Round Trip" *The mileage will be calculated in our office once the miles are verified.*

Private Transportation

Miles Per Round Trip	*Mileage Not Reimbursed	Reimbursed Miles	Amount Per Mile	Total Per Trip
36	-4		.50	
TOTAL				

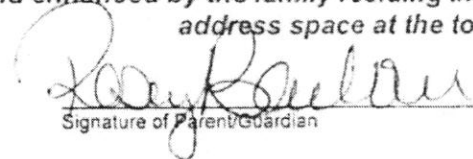
18
1 way

*Four (4) miles per round trip will be deducted.

Please indicate the maximum number of round trips you will be making per day: One (1) Two (2) Three (3)

I certify that the above claims are true and correct to the best of my knowledge and belief.

I further certify that the ability to earn a substantial portion of our family income is directly related to and enhanced by the family residing in the isolated location listed in the family address space at the top of this form.


 Signature of Parent/Guardian 8/19/10
 Date

Chairperson of School Board _____ Date _____

Clerk of School Board _____ Date _____

For Office Use Only

Amount Approved \$ _____ Approval Letter Sent (Date) _____ By _____