

APPLICATION FOR TRANSPORTATION OR MAINTENANCE OF ISOLATED PUPILS
2018-2019 SCHOOL YEAR
CAMPBELL COUNTY SCHOOL DISTRICT #1
 1000 West 8th St., PO Box 3033
 Gillette, WY 82717

Parent/Guardian: Aaron & Laci Lemm
 Mailing Address: 1055 Adon Rd. City/Zip Rozet 82727 Home Phone: (307) 686-8032
 Father's Place of Employment: Electrical Systems of WY, Inc. Work Phone: (307) 687-1986
 Mother's Place of Employment: Homemaker Work Phone: NA
 EXACT Location of Residence: 1055 Adon Rd.

Months for which Isolation is requested: Aug - ~~Nov~~ May Bus Route student would normally ride: # 39

Please Choose ONE of the following: Private Transportation Room & Board Family Move
 Please Choose ONE of the following: School Activity Transportation To /From School

Name of Student	Grade	School	School Activity(ies) To and From School
Tanner Lemm	10	Campbell County H.S.	Tennis Basketball, Golf, Track
Hayden Lemm	9	Campbell County H.S.	Tennis, Golf, Basketball, Track
Cooper Lemm			

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.
 Per the Isolation Policy, 4 miles per round trip may not be reimbursed, thus they are subtracted out of the total per trip.

Private Transportation Miles (Verified by Transportation Department)

Child & School	Miles Per Round Trip	*Mileage Not Reimbursed	Reimbursed Miles	Amount Per Mile 2016	Total Per Trip
Tanner - CCHS	50	-4	46	\$0.535	25.07
Hayden - CCHS	50	-4	46	\$0.535	25.07
		-4		\$0.535	

Please indicate the **maximum** number of round trips you will be making per day: One (1) Two (2) Three (3)
 Remember, each trip is counted as one (1) round trip from home to school location.
 If you are already in town and your child stays for practice & you then pick them up and go home, you may claim only a half (1/2) trip.
 If you work in town that day, while your child is participating in the activity, you may not claim a trip.

I certify that the above claims are true and correct to the best of my knowledge and belief. Furthermore, I understand the information provided on this page will be included on the Board of trustee's agenda, available to the general public.

Laci Lemm
 Signature of Parent/Guardian

8/13/18
 Date

Chairperson of School Board _____

Date Application Approved _____