

DECISION BY FINANCIAL AND ADMINISTRATIVE DIRECTOR ____ / ____ 20__ section ____
 attached

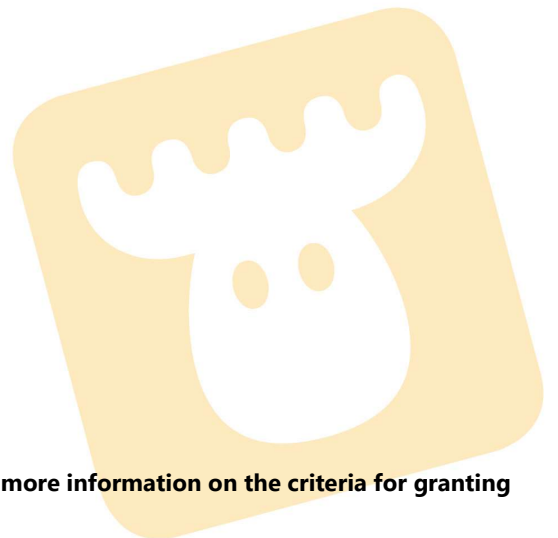
PERSONAL INFORMATION	STUDENT'S NAME		DATE OF BIRTH	
	Street address		City	
	School		Grade	
	Guardian's name		Guardian's phone number	
Disclosure of information	I give my consent for giving the contact information to the taxi driver: Yes <input type="checkbox"/> No <input type="checkbox"/>			
Other information	Does the child attend after-school activities? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Application	I apply for school transportation for the child under my care for the following period: ____ / ____ 20__ - ____ / ____ 20__			
	Reason for applying:		<u>Attachments:</u>	
Additional information	Distance to school over 5 km	<input type="checkbox"/>	Medical statement	<input type="checkbox"/>
	Distance to school ____ km	<input type="checkbox"/>	Psychologist's statement	<input type="checkbox"/>
	Dangerous commute to school (please specify under 'Additional information')	<input type="checkbox"/>	Teacher's statement	<input type="checkbox"/>
	Other reason (please specify under 'Additional information')	<input type="checkbox"/>		
	Distance to main road ____ km, distance to bus stop ____ km			
Additional information:				
Signature	Date	Guardian's signature and name in block letters		
	____ / ____ 20__			

The school transport guide of the municipality of Mäntsälä contains more information on the criteria for granting school transport

<http://www.mantsala.fi/asukkaille/koulutus-ja-opiskelu/perusopetus/koulut-ja-palvelut/koulukuljetukset>

Municipality of Mäntsälä, education and culture services palvelupiste@mantsala.fi

Heikinkuja 4, FI-04600 Mäntsälä Tel. (019) 264 5000 www.mantsala.fi



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