

Date: 5/8/18

Change in Bus Information

School Name Frenchtown Legal Entity 0599

Original Info:

Route #: 3

Vehicle ID#: 5003

Year: 2005

License #: 4-540

Rated Capacity: 83

Bus Driver: Denise LeRette

Miles Traveled on Route: 31

Change To:

Route #: 3A

Vehicle ID#: 1382

Year: 2019

License #: 4-99772B

Rated Capacity: 80

Bus Driver: Denise LeRette

Miles Traveled on Route: 31

Effective Date: 5/7/18

Reason: changed buses.



**Combined School District Application for
Registration of School Bus & State
Reimbursement**
School Year 2017 - 2018

TR-1(09/2006)
1 Copy County Superintendent
1 Copy School District

This form is required in accordance with Title 20, Chapter 10, Part 1, MCA. School district official must complete one form for each bus route that receives state reimbursement even though transportees of another legal entity may utilize the services.

Due Dates:	Paper Copy to County Supt	Electronic Submit to OPI	Rate Per Mile
All Routes	November 1	November 1	1.80
County Name	County Number	School System Name	School System Code
Missoula	32	Frenchtown K-12 Schools	0706
Route Number	Length of Route (miles per day)	Type of Service	Rated Capacity
3A	31.0	Regular	80
VIN	License Number	Ownership	
4UZABRE35KCKC1382	499772B	District Owned	

Reimbursement Distribution - The legal entity number and percentage of state/county reimbursement to be paid to each district.

	LE: 0599	
Route #: 3A	100.00	

PASSENGER INFORMATION

	ELEMENTARY RIDERS (Grades PK-8)	HIGH SCHOOL RIDERS (Grades 9-12)	TOTAL ELIGIBLE RIDERS
	a NUMBER	b NUMBER	c a+b
Regular (include Kindergarten riders)	49	12	
1st Wheelchair (WC)	0	0	
2nd Wheelchair (WC)	0	0	
Additional Wheelchairs (WC)	0	0	
Non-WC IEP Lists Trans as Related Service	0	0	
TOTAL ELIGIBLE RIDERS	49	12	61
Ineligible Public School Riders (i.e., under 3 miles OR nonresident and no attendance agreement that would otherwise allow nonresident riders to be eligible) (Include ineligible Preschool riders)	6	3	
Nonpublic School Riders (ineligible)	0	0	
TOTAL RIDERS	55	15	

We hereby certify that this bus will operate entirely on the route established by the Board of Trustees and within the transportation area assigned and approved by the County Transportation Committee. We further certify that this bus transports pupils eligible for school transportation as defined by 20-10-101, MCA.

We agree to supervision of this bus and bus route by the State Superintendent; to make such reports to the State Superintendent and County Superintendent as are required; to provide a vehicle which meets the minimum standards as established by the Board of Public Education, the Montana Highway Patrol and the State Superintendent; and to provide a licensed, qualified and approved driver to operate such vehicle as required by 20-10-103, MCA.

We also agree to refrain from soliciting or causing others to solicit students from other transportation areas.

We understand that violations of the laws, rules or regulations governing school transportation will be sufficient cause for withholding of state and county reimbursement for this bus route.

I certify that this application for registration of school bus and state reimbursement is true and complete to the best of my knowledge and belief, and the bus operates on the route as approved by and within the transportation service area assigned by the County Transportation Committee.

Signature - Chair, Board of Trustees	Date
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County Transportation Committee Approval as required in accordance with Section 20-10-132, MCA.
This Application for Registration of School Bus and State Reimbursement has been reviewed and I certify that this bus operates within the transportation area assigned to it by the County Transportation Committee.

Signature - Chair, County Transportation Committee	Date
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For Additional information contact Donell Rosenthal at (406) 444-3024 or email drosenthal@mt.gov

