(B7T) Nonpublic School Transportation Payment Voucher

Instructions

This request shall be filed by the parent or guardian of eligible nonpublic school students with the secretary of the local school district for the first and second semesters upon request. This request must be filed prior to the end of the fiscal year (N.J.A.C. 6A:27-2.1(d)).

When properly executed, this form may be accepted as an official voucher. The local board of education may pay transportation aid based on this claim pursuant to N.J.S.A. 18A:39-1 and 18A:19-3.

Section 1: Application Form				
Full Name of Parent / Guardian:			Email address:	
Full Name of S	tudent:			
Address:		City:	State:	Zip Code:
Name of Nonpo	rofit Nonpublic Scho	ol:		
City:		State:	Dates of attendance (mm/dd/yy): From:	to:
Section 2: Co	ertification Staten	nent		
Note that these	e form field, except s	signature and date, autofill with the	information from Section 1.	
I,		,do hereby certify that,	has been transported to	
located in		,not more than 20 miles from the resident of the student for the period of time		
from	to	. In consideration thereof, I hereby request payment of transportation aid pursuant to N.J.S.A. 18A:39-1.		
-	· · · · · · · · · · · · · · · · · · ·	nder the penalties of the law that th ortation from any other school distri	is request for payment is correct in all its particu ct for the same period of time.	llars, and that I am not claiming
Signature of Parent / Guardian:			Date (mm/dd/yy):	