

McKinney-Vento Bus Pass Agreement Form

The purpose of the McKinney-Vento Homeless Assistance Act is to assist families that are experiencing homelessness or a temporary transition. Walatowa High Charter School will strive to remove barriers that may prevent your child from receiving free, appropriate public education.

Under the provisions of the McKinney-Vento Act our district is supporting your request for school of origin enrollment and transportation. [\[42 U.S.C. § 11432\(g\)\(1\)\(J\)\(iii\)\(D\)\]. U.S. Code](#) Our office has determined that providing you with bus passes is the most logical and viable mode of transportation at this time. District safety policies were a consideration in making this determination.

Please review the following required agreements for the issuance of bus passes before providing your signature:

- I agree to use the bus pass for transportation to and from school activities only.
- I am aware attendance may be evaluated for consistency, and the expectation is for daily, on time attendance.
- I agree to never use the bus pass for personal use.
- I understand the McKinney- Vento Homeless Liaison may electronically monitor the bus pass for usage.
- I understand, if there is excessive use, the district reserves the right to cancel the bus pass.
- I agree to never allow my elementary or junior high students to ride public transportation alone.
- I understand and agree my child(ren) must be accompanied by an adult (18 years or older). If the district learns that my child(ren) in the specified grade-levels is riding alone, the bus pass may be cancelled, and district security or officials may be notified.
- I agree to notify the McKinney-Vento Homeless Liaison at (505-527-3392) immediately if the bus pass is lost or stolen. At that time, I may request the issuance of a new card.
- I have read and understand the terms of the (enter transit name, e.g., Sandoval County Express include link to page: <https://www.riometro.org/182/Sandoval-County>).

Student(s) Name	Student(s) School ID #	Student(s) School of Attendance	Student(s) Grade-Level	Bus Pass # Issued	Date Bus Pass Issued

Parent, Guardian, Caregiver's Name	Contact Phone Number	If applicable, enter the bus pass # issued to the parent	Date Bus Pass Issued

By signing below, I understand that my child(ren) and I must abide by the rules listed above.

Parent Name in Print	Signature	Date
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Student Name in Print Signature Date