



BERKSHIRE LOCAL SCHOOLS

14155 Claridon Troy Rd., Burton, OH 44021 • 440.834.3380 ext. 2101

TRANSPORTATION REIMBURSEMENT REQUEST

Please PRINT this form.

Name of Student: _____

Grade student will be in for the 2023-2024 school year: _____

Name of non-public school this student is attending: _____

Name of Student: _____

Grade student will be in for the 2023-2024 school year: _____

Name of non-public school this student is attending: _____

Name of Student: _____

Grade student will be in for the 2023-2024 school year: _____

Name of non-public school this student is attending: _____

Name of Parent/Guardian: _____

Home Address: _____

City/State/Zip: _____

Cell Phone: _____ Alternate Phone: _____

Parent/Guardian Signature: _____ Date: _____

Mail this form with **two copies of the Contract form by October 15th** to:

Berkshire Local School District
Transportation Department/First Student
P.O. Box 1100
Burton, OH 44021