# NEW HORIZON COLLEGE

Affiliated to Begaluru North University Recognized by Govt. of Karnataka
Recognized under section 2(f) of the UGC Act,1956
3rd 'A' Cross 2nd Main, Kasturinagar, Bengaluru - 560043

The Trust is a Recipient of prestigious Rajyotsava State Award 2012 conferred by the Government of Karnataka

Affix
Stamp Size
Photo

No. :

## APPLICATION FOR BUS PASS: 2026 - 2027

1. NAME OF THE STUDENT :
(IN CAPITAL LETTERS)

2. Class / Section: _____

3. Student ID Number: _____

4. Father's / Mother's Name : _____

Father Contact Number: _____ Mother Contact Number: _____

Student Contact Number: _____

5. Address : _____

_____

_____

6. Pick-up Point Name

Distance A B C D E

7.

| Challan No. | Date | Amount |
|---|---|---|
| | | |

8. Pick-up Point No.

9. Blood Group :

***Please see overleaf for details***

**DECLARATION**

I declare that I have read the rules and regulations governing utilisation of bus facility and have accepted the same. I shall abide by them strictly. Kindly provide bus facility for my ward / myself.

Date : (Signature)

**TRANSPORT DEPARTMENT**

Verified Challan No. _____ Date: _____ Amount _____

Pick-up Point No. Distance A B C D E

Transport Manager

ACCOUNTS DEPARTMENT

Verified the above details and records are updated

Date : **HOD ACCOUNTS**

RECEIVED THE BUS PASS

Name : _____ Course: _____ Section: _____

Language : _____ Signature : _____ Date: _____