

Date: _____

Bal Bharati Public School
Ganga Ram Hospital Marg
New Delhi-110060

APPLICATION FOR DISCONTINUATION OF SCHOOL BUS FACILITY

This is to bring to your kind notice that my ward _____
Admn. No. _____ Class _____ Section _____ has been availing the school bus
facility (Route No _____).

However , he /she would not be able to continue using the bus as _____

_____.

You are requested to do the needful .

Yours sincerely

