

ANDHRA PRADESH STATE ROAD TRANSPORT CORPORATION

STUDENT BUS PASS APPLICATION UPTO SSC

Previous ID Card No (2023-24)

:

1. Student Details

- 1.1 Name :
1.2 Father's/ Guardian's Name :
1.3 Date of Birth (dd/mm/yyyy) :
1.4 Gender : Male Female
1.5 Aadhar No. :
1.6 Mobile No. :
1.7 IsEmployee :
1.8 Children : Yes NO If Yes Enter Empid:
1.8 Email :

Photo

2. Residential Address Details

- 2.1 District : 2.2 Mandal :
2.3 Village : 2.4 Address :

3. School Details

- 3.1 School Code : 3.2 District :
3.3 Mandal : 3.3 School Name :
3.5 Class : 3.6 Admission No. :
3.7 School Address :

4. Route Details

- 4.1 Center : 4.2 Pass Type :
4.3 From Place District : 4.4 To Place District :
4.5 From Place: Via: To Place:

Enclosures: Bonafide Certificate

I here by declare that the particulars given above are true and found correct. I will abide by the rules & regulations of APSRTC governing issue of Bus Passes.

Signature of Head of the Institute/School

Signature of the Student

BONAFIDE CERTIFICATE

I hereby certify that Sri/kum/Smt _____ is bonafide student of _____ (Name Of the Institution)studying _____ (Name of the course)With Admission No _____ & Roll No _____ His/Her Date of Birth is _____ (DD-MM-YYYY)as per office records and the course will be completed by _____ (dd/mm/yyyy).Educational Institute Recognition Code No _____ (As per the D.E.O. records). Course Code No _____ for the Academic year 2024-2025.

Date:

Place:

Principal