

South Carolina Department of Education
Approval to Transport Special Needs Students
 School Year # _____

R-55

This is to request approval of contract routes for student(s) requiring special transportation. **This approved contract will be reimbursed for a period beginning no earlier than 10 days before it was received by the County Supervisor of Transportation. State reimbursement will be based on the number of school days the students are transported to or from school by the provider of service.** The contract is effective through the last day of this school year or the last day of service by the provider during the present school year, whichever comes first. The contract is between the provider of service and the school district listed below.

School District: _____

Mode of transportation: [check one, and provide associated information]

- Private Contractor Name and Address: _____
- District Bus # _____
- Other District Vehicle # _____

Any vehicle used under the terms of this contract must meet Federal Vehicle Safety Standards for school bus construction if the vehicle manufacturer's designed capacity is more than 10 passengers in addition to the driver. The contractor identified above is required to carry insurance in accordance with Section 59-67-710 Code of Laws of S.C.

List students being transported under the terms of the contract. (Attach additional pages, as needed, in order to list all students.)

#	Student Name	Address for pick-up / drop-off	School Attending	MDA*	Student rides to school	Student rides from school
1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* If any of the students listed are attending a class under a "Multi-District Agreement" (MDA), attach a copy of the Department of Education, Office of Programs For Exceptional Children's approved Application For The Establishment of Multi-District Educational Programs, SDE 29-032-07 to this form.

Total number of students being transported under the terms of this contract: _____

Explain why a state bus cannot be used to serve the listed student(s): [Attach additional page(s) as needed.]

Reimbursable daily mileage: miles
Round to nearest tenth

Maximum days to operate: days + days = days
1st Semester (90 days) 2nd Semester (90 days) School Year

Calculations for maximum possible reimbursement provided under the terms of this contract:

- (A) Reimbursable daily mileage miles
 Maximum reimbursable daily mileage for private and other (non-bus) district vehicles is 64 miles.
- (B) Days of operation days
 Maximum days this contract is will run during the school year; days in any one semesters cannot exceed 90, or the number of remaining school days in the semester, whichever is less.
- (C) Reimbursement rate \$ /mile
 \$1.24 for District Buses, 54.0¢ for private and other district vehicles.
- (D) Total maximum mileage reimbursement \$
 Reimbursable daily mileage (A) x Days of operation (B) x Reimbursement rate (C).
- (E) Multi-student reimbursement (for private and other district non-bus vehicles only) \$
 (Number of students transported – 1) x \$1.11 x Days of operation (B).
- (F) Total maximum contract reimbursement \$
 Total maximum mileage reimbursement (D) + Multi-student reimbursement (E).

 District Special Needs Coordinator Signature Date

 District Transportation Supervisor Signature Date

 SCDE County Supervisor Signature Date

 SCDE Approval Signature Date