

Government of the District of Columbia
Department of Transportation



Kids Ride Free Application for DC Private School Students

SCHOOL YEAR 2019/2020

Enter Application Electronically and Print Clearly

Select one: New Application Replacement Application

School Name: _____

School Address: _____

City: Washington, DC Zip Code: _____

Student Name: _____
Last First M.

Student Home Address: _____

City: Washington, DC Zip Code: _____

Grade: _____ Date of Birth: _____

Metrobus Route(s) Used: _____

Metrorail Station(s) Used: _____

I certify that the information on this application is true and accurate and that the above-mentioned student is a resident of the District of Columbia and enrolled in the school(s) indicated above.

Principal's Signature: _____ Date: _____

To be submitted by authorized school staff only: Please upload to <https://forms.gle/KHv58WngJ3ZF92up8>. Allow 7-10 business days for delivery of cards to the requesting school.

DDOT School Transit Office: 202-673-1740

DDOT APPROVAL NAME: _____ DATE PROCESSED: _____