

**Hong Wen School**  
**Request for School Bus Services**

To:

Phua Swee Sun and/or Serene Tan Poh Tin

Contact no: 9698 9908

Contact person: Serene Tan

Contact email: hongwenschoolbus@gmail.com

**PLEASE NOTE:**

1. This Form sets out your request for school bus services. **It does not constitute the bus operator's agreement to provide the services.** The bus operator will review the information you provide in this Form and will confirm with you the pick-up and drop-off location, as well as the bus fare. Please note that the school bus operator may propose an alternative pick-up and/or drop-off location. The use of common pick-up and drop-off points could help operators deploy their drivers more efficiently, as it allows them to ferry more students on each school bus route and, where appropriate, use larger capacity buses. Such an arrangement would not only help operators cope with fewer drivers, but may also help reduce the overall journey time due to fewer stops, as well as allow for later boarding times for students who are picked up first. If you are agreeable to and accept the pick-up and drop-off location as well as the bus fare proposed by the school bus operator, a contract will be constituted between you and the school bus operator for the provision of school bus services for the calendar year 2026 ("**Parent Agreement**").
  2. The Terms and Conditions Governing this Request for School Bus Services set out in **Annex A** below are deemed to be incorporated into the Parent Agreement.
  3. You must submit this Request to the school bus operator by **31 October 2025** if you wish the school bus operator to consider your request.
  4. Please note that the school bus operator is not obliged to provide transport services where the distance between the pick-up and drop-off location is more than 2km from the school, or where your child/ward requires after-school drop-off for activities ending after 4pm.
-

Name of Child: \_\_\_\_\_ Level (2026): Primary \_\_\_\_\_

Home Address: \_\_\_\_\_

Postal code: \_\_\_\_\_

Contact Number: (Home) \_\_\_\_\_ (HP) \_\_\_\_\_ (HP) \_\_\_\_\_

Please tick accordingly:

☐ One-way (To School)

☐ One-way (From School)

☐ Two-way

☐ Remedial Class/CCA (Day: \_\_\_\_\_ Ending Time: \_\_\_\_\_)

If pick-up/drop-off addresses are different from the home address, please indicate:

|          | Address | Postal Code |
|----------|---------|-------------|
| Pick-up  |         |             |
| Drop-off |         |             |

☐ I consent to the School Bus Operator using the abovementioned information for the purpose of providing School Bus Services and consent to the School Bus Operator disclosing such information to the school.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Name of Parent/Guardian

\_\_\_\_\_  
Date