

**UTAH STATE BOARD OF EDUCATION
PUPIL TRANSPORTATION
Schedule A1 Signature Form**

District _____ Date _____

	Total Eligible Miles	Total Eligible Minutes
Current Year	_____	_____
Prior Year	_____	_____
Difference	_____	_____
% Change	_____	_____

Explanation of Added or Deleted Regular Education Routes Only

Please provide details on added or deleted routes. Additional lines on next page.

<u>Route #</u>	<u>Added/Deleted</u>	<u>Comments</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

We, the undersigned, acknowledge that we have reviewed the attached Schedule A1 report, and verify that the information supplied is accurate to the best of our knowledge.

We, the undersigned, also acknowledge that we have reviewed the following entries to the School District's Annual Financial Report (AFR) for the General Fund under 2700 Support Services - Student Transportation: **513 Commercial, 514 Student Allowance, 515 Payments in Lieu of Transportation - Subsistence, 516 Payments of Mileage in Lieu of Bus (Dead Miles)**

Signature of Business Administrator _____
Date

Signature of Transportation Supervisor/Director _____
Date

