	School Transport Services LLC	
	Student Registration	STS-SD-M-01-F-01

School Name: _____

Name of Student: _____

Student ID No.: _____

Upload Photograph (JPEG format)

Grade / Year: _____ **Section:** _____ **Nationality:** _____

Date of Birth: _____ **Age:** _____ **Gender:** _____
DD/MM/YY

Service Start Date: _____ **Medical Condition / Allergy (if any):** _____

RESIDENCE DETAILS:

Emirate: _____ **Area:** _____

Nearest Landmark / Pick-up Point: _____

Location Latitude (X): _____ **Location Longitude (Y):** _____

Parent / Guardian Name: _____

P. O. Box: _____ House / Building / Villa No.: _____ Street: _____

Makani No.: ☐☐☐☐☐ ☐☐☐☐☐ (Issued by Dubai Municipality / Applicable only for the Emirate of Dubai.)

E-mail: _____ Alternate E-mail: _____

Office No.: ☐☐ ☐☐☐☐☐☐☐ Residence No.: ☐☐ ☐☐☐☐☐☐☐ Emergency No.: ☐☐☐ ☐☐ ☐☐☐☐☐☐

Father's Mobile: ☐☐☐ ☐☐ ☐☐☐☐☐☐☐ Mother's Mobile: ☐☐☐ ☐☐ ☐☐☐☐☐☐☐

☐ I have read and understood the Terms and Conditions (STS-SD-M-01-F-02) of School Transport Services LLC (STS) and agree to the clauses stated therein.

For Office Use Only

Ref No.: .....

Bus No.: .....

Date: .....

_____ _____

Parent's Signature **Date**