California Department of Education Office of School Transportation OST-006 (Revised 08/2019)

Transportation Administrator Course Enrollment Form

Instructions: Completed form and course fee must be mailed to the Office of School Transportation (OST) at 825 Riverside Parkway, Suite 110, West Sacramento, CA 95605. Forms submitted without payment will not be accepted.

Applicant Information	
Name:	County:
Home Address:	City and ZIP:
Phone Number:	Personal Email:
Employer Information	
Primary Employer:	County:
Work Address:	City and ZIP:
Work Phone:	Work Email:
Course Assignment and Cor	nfirmation
Instructions: Signature certifies that Signature must be handwritten.	the information provided on this form is complete and accurate.
First Choice Course:	Next Choice Course:
Applicant Signature:	Date:
Course Fee and Cancellation	n Policy
Education" or "CDE" and mailed to Suite 110, West Sacramento, CA 99 Cancellations 90 days or more prior cancellations less than 90 days but refund, and cancellations 30 days or	id by check or money order, made out to "California Department of the Office of School Transportation at 825 Riverside Parkway, 5605. Cash payments and purchase orders are not accepted. If to the course are eligible for a 100% refund of the course fee, more than 30 days prior to the course are eligible for a 50% or less prior to the course are ineligible for a refund.
Course fee of \$1 200	