

TRANSPORTATION

Student's Name _____ Date _____
Student's address _____

Teacher's Name _____ Grade _____

Parent's Name & Phone # _____

Babysitter's name & Phone # _____
Babysitter's address _____

Please indicate how and where your child is to be transported each day. (Example - bus, walk, home, babysitter, daycare, etc.)

<u>Day</u>	<u>A.M.</u> <u>How & Where</u>	<u>P.M.</u> <u>How & Where</u>
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____

Any changes **MUST** be accompanied by a note or call to the office. No child may ride a bus that they are **NOT** assigned to ride without permission from administration.

Arrangements for 3 hour delay (Pickup)

Arrangements for early dismissal (Dropoff)

Arrangements for extended day (Dropoff)

For Office Use:

Bus driver's name & Bus # _____