



(6)TRANSPORTATION FORM

School Year 2019-2020

| APPLICATION DATE | EFFECTIVE DATE | SCHOOL | GRADE |
|------------------|----------------|--------|-------|
| ___/___/___ | ___/___/___ | | |

| BIRTH DATE | GENDER | STUDENT'S NAME AS SHOWN ON BIRTH CERTIFICATE | | | |
|-------------|---|--|-------|--------|-------------------------|
| ___/___/___ | <input type="checkbox"/> Male <input type="checkbox"/> Female | | | | |
| | | Last | First | Middle | Suffix (Jr., II., etc.) |

| STUDENT'S RESIDENTIAL ADDRESS (NOT POST OFFICE BOX) | | RECEIVES MAIL? | ADDRESS CHANGE? |
|---|--|---|---|
| Street 1 | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Street 2 | | | |
| City ST Zip | | | |

| WHAT IS THE BEST PHONE NUMBER TO CALL IN AN EMERGENCY? | PERSON TO ASK FOR AND RELATIONSHIP TO STUDENT |
|--|---|
| | |

| PARENT / GUARDIAN 1 | NAME: | WK#: | CELL#: | OTHER: |
|---------------------|-------|------|--------|--------|
| | | | | |
| PARENT / GUARDIAN 2 | NAME: | WK#: | CELL#: | OTHER: |
| | | | | |

I AM REQUESTING TRANSPORTATION FOR MY CHILD LISTED ABOVE AS FOLLOWS:

| TO SCHOOL | | DAYCARE / ALTERNATIVE LOCATION ADDRESS |
|--------------------------------|--------------------------------|--|
| PICKUP AT (CIRCLE DAY OF WEEK) | | |
| HOME | DAYCARE / ALTERNATIVE LOCATION | |
| DAILY M T W TH F | DAILY M T W TH F | |
| PHONE#: | PHONE#: | |

| FROM SCHOOL | | DAYCARE / ALTERNATIVE LOCATION ADDRESS |
|----------------------------------|--------------------------------|--|
| DROP OFF AT (CIRCLE DAY OF WEEK) | | |
| HOME | DAYCARE / ALTERNATIVE LOCATION | |
| DAILY M T W TH F | DAILY M T W TH F | |
| PHONE#: | PHONE#: | |

The District Policy allows us to provide no more than two (2) different pick-ups & drop-offs; EXAMPLE: Either at home residence or one (1) other designated location.

We recognize that occasions may arise when your child care arrangements cannot be made by APRIL 1. Requests made AFTER APRIL 1, 2019, however, may not be able to be provided.

I certify that the information provided above is accurate and complete:

Parent/Guardian Signature

Date