

GREENVILLE COUNTY SCHOOLS TRANSPORTATION DEPARTMENT
"Transporting With Care"

Student Transportation Status
2012-2013

PLEASE PRINT ALL INFORMATION.

School Name: _____

Student's Name: _____ Grade: _____

Student's Street Address: _____

Student's City: _____ Zip: _____

Arrival Method:

(circle one)

- Car (22)
- Walk / Bicycle (33)
- Regular Bus (44)
- Magnet/IB Bus (See Magnet Coordinator)
- Special Ed Bus (77)
- Special Ed (Wheelchair) (79)
- Day Care Bus (99)

Departure Method:

(circle one)

- Car (22)
- Walk / Bicycle (33)
- Regular Bus (44)
- Magnet/IB Bus (See Magnet Coordinator)
- Special Ed Bus (77)
- Special Ed (Wheelchair) (79)
- Day Care Bus (99)

Parent/Guardian Name: _____

Parent Contact Numbers: _____; _____; _____

Entered in PowerSchool: _____ Employee initials: _____ Date: _____

Parent: Return completed form to school

School: After entry in Powerschool, fax to appropriate Bus Center

Bus Center: Route within 3-5 school days - contact Parent/Guardian