Student Transportation Request Form 2024-2025

NOTE: Magnet & Special Needs Transportation do not use this form. See your Coordinator/Case Manager.

Return this completed form to school office. Incomplete forms will not be processed.

(Forms should be submitted if student is new or if address, school, or mode of transportation has changed)

School	l Name (Print):	Date: _	Date:						
Studer	nt's Name (Print): _						Grade	_Grade:	
Apart	ment/Subdivision N	ame (Prin	t):						
Student's Street Address (Print): Student's City (Print):					Apt #			_Apt #	
					Zip:				
Altern	ate Transportation	Address ()	Print):						
Arrival Method:					Departure Method:				
	Regular Bus		(44)		R	egular Bus		(44)	
	Car		(22)		C	ar		(22)	
	Day Care Bus		(99)		D	ay Care Bus		(99)	
	Walk / Bicycle		(33)		W	/alk / Bicycle		(33)	
	active, please notify t ***Requests received will be implemented i 2024. After Septembe transportation. ***Buses are subject	l after July 8 in the order er 3, 2024 a	3, 2024 may n in which they nd during the	not be routed for were received b e school year, it n	the first day y the Transp nay take up t	of school. Transpo ortation Office beg o 5 school days to	rtation for ginning Sep	late forms	
Parent/Guardian Name (Print):					(Signature):				
Paren	t/Guardian Contact	Numbers	:						
1.	Phone (Number to receive automated messages/emergency/attendance info)								
2.	Phone			Mom □	Dad 🗆	Guardian 🗆			
3.	Phone			Mom 🗆	Dad 🗆	Guardian 🗆			
			To be	completed by Sc	hool Officia	ls			
	Enter & Verify in PowerSchool: Addre			dress	Contact Inj	formation Ar	rival/Depai	ture Code	
	***Init	ial once inf	ormation has	s been entered &	verified in l	Power School:			

School: After entry in Powerschool, email to appropriate Bus Center ONLY IF REGULAR BUS IS REQUESTED

AM Stop Location:	<u>Rt:</u>	Time:	
PM Stop Location:	<u>Rt:</u>	Time:	