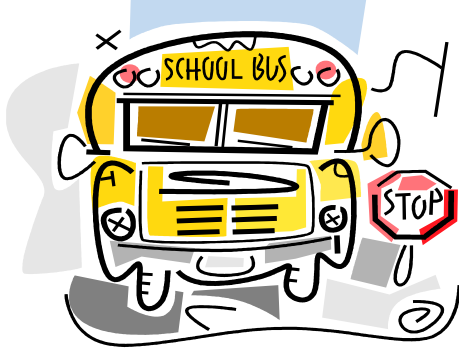


TRANSPORTATION FORM

(Please return this form to your child's teacher during open house or the first day of school.)



It is very important to us to make sure your child is where he/she needs to be when departing from school. Please complete the information below. This form will be kept as a reference.

If your child's transportation schedule needs to be changed, please send a note to your child's teacher and the front office staff with the scheduled changes and effective date(s).

(Please print/type information)

Child's Name: _____ Teacher: _____

Contact phone #: _____

Part I:

My child will **depart** school:

Day (Please indicate <u>only one</u> form of transportation <u>per</u> <u>day</u>)	In the afternoon, my child will be a car rider (please indicate the day(s) your child will be a car rider)	In the afternoon, my child will go to a daycare (name of daycare)	In the afternoon, my child will ride a bus home (bus number)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

Part II:

If your child will be a **car rider on any particular day**, please complete the statement below:

I give permission for the following individuals to pick up my child: (please print)

**** I understand that the above instructions will be followed unless I send a note to my child's classroom teacher advising of an afternoon change.****

Signature of parent/guardian

Date