## **Bus Registration Application Form 2022-2023**

Please complete this form and return it to the transportation office for consideration. Once the form information is approved and entered in the database your student will be assigned to a bus ( 3 to 5 days ). We will place them on a ROSTER for that bus ONLY. You then be notified by e-mail or text of the bus number, stop location, and approximate AM time.

PLEASE PRINT & USE ONE FORM PER STUDENT Date//							
Student Name : Last	First				M		
Student ID #	Birth Date	/_	_/	School	Grade		
Check all that apply: Mon _	Tue	Wed	Thu	Fri	AM _	PM	
Parent(s) / Guardian(s)				Phone/Te	ext #		
Residency Address							
City Z							
Housing Development							
Mailing Address if Different _							
City							
Parent(s) / Guardian(s)				Phone/Te	ext #		
Secondary Physical Address _							
City Z							
Housing Development							
Mailing Address if Different _							
EMERGENCY CONTACT – othe	er than parent	t(s) / guard	lian(s)				
Name	Relati	onship		Phone	e/Text #		
<b>HEALTH INFORMATION</b> - Doe	s this student	have any r	nedical	conditions or i	issues we should be	aware of :	
Such as asthma, allergies of a	ny kind, diabe	tes, etc `	YES	NO			
If Yes EXPLAIN :							
The Current Parent/Student I My student and I understand therein. Any violation of these	Bus Rider Han that we are re	dbook can sponsible f sult in susp	be fou for and ension,	nd on the disti will comply wi expulsion of t	rict website under T th the information or ransportation privile	contained	