BUS INFORMATION SHEET

For Office Use Only:
Bus In #
Bus Out #
Student #

Date	St
Child's Name	
Child's Address	
Child's Grade	Home Phone#
My child should be picke	d up at
My child should be dropp	ed off at Address
Additional Information	
Parent's Name	Phone Number
Parent's Signature	Date
	ENTER ELEMENTARY SCHOOL - ONLY **** n adult at the bus stop or the child will be brought back te pickup.
	to change buses or bus stops. Please include the s below of any adult, other than parents, who may the bus stop.
	
	
	