

Centerville City Schools Transportation Form

Dear Parents,

All students are routed to and from their home address. If your student will **not** be riding the bus to or from your home address, then you **must fill out** this form. This information is very important to us in order to insure the safety of your child. If your student is being transported to or from a sitter's home, the sitter must be in the same attendance area as your student.

School _____ Teacher _____ Grade _____

Student's Name _____ Home Address _____

Phone # _____

Place an X to indicate your student's schedule only if they are not riding to or from home address.

To School:

Day	Parent/Guardian Pick up	Daycare/Voyager	School Bus (sitter)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

From School:

Day	Parent/Guardian Pick up	Daycare/Voyager	School Bus (sitter)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

Name of Daycare: _____ Phone: _____

Daycare Address: _____

Name of Sitter: _____ Phone: _____

Sitter Address: _____

Parent Name : _____ Date: _____ Daytime Phone: _____
 (please print) Cell # _____

EFFECTIVE DATE: _____

Office Use Only

Transportation Rec'd _____ faxed _____ School Rec'd _____

Cancel form effective _____ per _____ and _____
 Date person requesting date of call

faxed