## WHITEHALL DISTRICT SCHOOLS KINDERGARTEN TRANSPORTATION SCHEDULE FORM

Student Name:			_	Date:		
Home Address:				City:		
Phone: ()	Cell: ()		_		::	
IS SCHOOL BUS TRANS	SPORTATION NEEDED?:	YES	or	NO	(circle)	
DOES SOMEONE NEED	TO BE PRESENT AT THE BU	S STOP TO	О МЕН	ET THI	S CHILD?: YES or NO	
house. If you are not at the designated stop without	ent, the designated person must ne stop, the driver will not drop y supervision, your child will be ret can accept your child:	your child. I urned to sch	If you s ool.	stated th	at your child cannot be left at	
<u>IMPORTANT</u>						
to ½ mile to their bus stop drop-off address. (ie: Picl	transportation to and from bus stop Students will be allowed only ox-up address of 111 Daycare Lane students, no daily changes will be	ne designate Mon-Fri, d	ed pick rop-off	-up add	lress and only one designated	
Student's pick-up address: Home Daycare				Phone#:		
		<del></del>	_	Phone	e#:	
Therefore, please provide y	n the process of preparing information as soon to our childcare provider information	as possible	to assi	st us in	establishing our tentative bus	
to establish bus stops, time	nges to bus stops or bus routes from s, and to effectively communicate in childcare provider information in Schedule Form.	any changes	s to par	ents and	d students. During the school	
Parent/Guardian Signature				Date		

PLEASE RETURN THIS FORM TO YOUR SCHOOL OR THE BUS GARAGE EVEN IF YOUR CHILD DOES NOT REQUIRE TRANSPORTATION. FAX NUMBER (231) 893-1061

NO TRANSPORTATION WILL BE PROVIDED IF THIS FORM IS NOT RETURNED.