

FINDLAY CITY SCHOOLS STUDENT TRANSPORTATION REGISTRATION

In an effort to make our bus routes more efficient, we are now requiring parents/guardians to request transportation for their student(s). **YOU MUST COMPLETE AND RETURN THIS FORM EACH SCHOOL YEAR IN ORDER FOR YOUR STUDENT TO BE PLACED ON A ROUTE.** Please complete the form even if your child **does not** need to ride the school bus.

(Please complete one form for each student)

Current student: _____ **New student:** _____ **Student withdrew:** _____ **Student moved:** _____

Student's name: _____ D.O.B: _____

Student's Address: _____

If student has moved, previous address: _____

Phone #: _____ Other #: _____

Mother/Guardian Name: _____ Father/Guardian Name: _____

2019-2020 School: _____ **2019-2020** Grade: _____

Specify IEP Program: _____ Special Equipment: _____

TRANSPORTATION NEEDED: AM _____ PM _____ BOTH _____
MY CHILD DOES NOT NEED TO RIDE THE SCHOOL BUS _____

*Please keep in mind that if your child lives in a designated walk area this form **will not** override bussing eligibility.*

To request bus service for a student residing in the designated walk area, to accommodate a sitter situation or to request a change in an eligible student's bus stop assignment, please complete a Bus Service Request Form. The form can be picked up at your child's school or can be found on the District's website at www.findlaycityschools.org. Click on District Information, Transportation, Bus Service Request Form.

Parent/Guardian Signature: _____

Please return this form to your student's school. You may also mail or fax this form to:

Findlay City Schools- Transportation Department
2019 Broad Ave
Findlay, OH 45840
419-425-8271
Fax: 419-427-5466

This Section to be Completed by the Transportation Department

Bus Service for the above student has been established as follows and can begin on the date indicated:

	<u>BUS STOP</u>	<u>STOP TIME</u>	<u>*Circle one:</u>
AM BUS#	_____	_____	Crosser/Doorside
PM BUS#	_____	_____	Crosser/Doorside
NOON BUS#	_____	_____	Crosser/Doorside

*Authorized Start Date: _____

***School Secretary will notify parent of bus information**