



SUMMER SCHOOL BUS SERVICE 2011

NAME _____	ROUTE # _____	SENT TO SCHOOL _____
Session: _____ 1 _____ 2 _____ Both		

Parent/Guardian Agreement:

I understand that it is the school district's policy for students to use the same bus stop every day. This rule is intended to ensure safe and orderly transportation of the students. There is a limited capacity to each bus and students must be assigned to a specific route. The Transportation Department will honor one pick-up address and one drop-off address per student. If my student will not be using the same pick-up address and/or drop-off address consistently four days per week, I will be responsible for supplying alternative transportation for my student.

***PARENT SIGNATURE:

STUDENT NAME: _____ **10-11 GRADE:** _____

PARENT INFORMATION

Parent name _____	Date _____	
Address _____	E-MAIL _____	
Home Phone _____	Work Phone Number _____	Cell Phone _____

CHILDCARE PROVIDER INFORMATION (If applicable)

Name _____	Phone Number _____
Address _____	
Contact Person and Phone Number _____	

INSTRUCTIONS FOR D95 TRANSPORTATION:

(These instructions are to inform the D95 Transportation Department what services your student will require. Please be aware, not everyone's situation is the same. Some students' daily activity schedules change; not requiring consistent D95 Transportation all four days. For example; some students are transported home Mon, Tues, Thurs and a parent transports Wednesday. There are many students with many individual needs. To supply the safest transportation possible; it is helpful that the Transportation Department and Summer School Bus Driver be aware of these schedule inconsistencies.)

Indicate who is to transport your student to school:

DISTRICT 95 CHILDCARE PROVIDER PARENT/OTHER _____

Circle what days District 95 Transportation will transport your student to school: M T W TH

Provide the address District 95 Transportation should use when determining your student's pick up location: _____

Indicate who is to transport your student after school:

DISTRICT 95 CHILDCARE PROVIDER PARENT/OTHER _____

Circle what days District 95 Transportation will transport your student after school: M T W TH

Provide the address District 95 Transportation should use when determining your student's drop off location: _____

ENCLOSE THIS FORM WITH YOUR SUMMER SCHOOL REGISTRATION BY May 16, 2011
PLEASE NOTE: Busing will only be provided TO Session 1 and take home AFTER Session 2.