

STREATOR ELEMENTARY SCHOOL DISTRICT #44
Request for Transportation to a Caregiver

Please circle attendance center

Centennial

Kimes

Northlawn

I, the undersigned, request that my child/children be allowed to ride a bus to and from a caregiver's address, rather than to our home address.

_____ Our home address is 1.5 miles or more from my child/children attendance which qualifies for free bussing. I understand that this request may only be granted if there is an existing bus stop and if space is available on the bus.

_____ Our home address is not within the 1.5 miles of my child/children's attendance center. I understand I must submit a bus pass application and fee along with this request and agree to the terms of the application.

You will be notified by your child's school office if this request has been granted. You will be responsible for transportation until then.

Parent name: _____

Home address: _____

Phone #: _____

Student name(s): _____ Grade: _____

Name of caregiver: _____

Address: _____

Phone #: _____

Parent/guardian signature: _____

Request approved: _____ Request denied: _____

Bus #: _____

Bus stop: _____ AM bus time: _____