

KEOKUK COMMUNITY SCHOOL DISTRICT

Application for Student Bus Transportation

****Distance must be over two miles for Elementary, and over three miles for Middle/High School**

Date transportation is requested to start _____

Parent/Guardian: _____ Parent/Guardian: _____

Phone Number: (Home) _____ Phone Number: (Home) _____
(Cell) _____ (Cell) _____

Home Address _____

*Address if student is not being transported to/from home _____

Student(s) to be transported:

<u>Name</u>	<u>Grade</u>	<u>School</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Parent/Guardian: Please return this form to the school office. **KCSD Transportation Office will contact you with bus route information. Students will not be allowed to ride a bus until you have been contacted by the KCSD Transportation Office. Please call (319)524-3690 with any questions.**

Buildings: Please scan completed form to Shawn Marlin at shawn.marlin@keokukschools.org. Please send the original in the district mail.

***All Kindergarten students must have an adult at the bus stop. The parent/guardian may give permission for the Kindergarten student to walk from the bus stop by submitting a note signed and dated to the KCSD Transportation Office.**

Office Use Only

Date Received: _____ Start Date: _____

Bus Eligible: _____ Yes _____ No _____ Handicapped(IEP required)

AM _____

Bus Color: _____ Bus Stop: _____

PM _____

Bus Color: _____ Bus Stop: _____

