

PANTHER VALLEY SCHOOL DISTRICT
BUS TRANSPORTATION 2011-2012

EVERY STUDENT MUST RETURN A FORM EVEN WHEN TRANSPORTATION IS NOT REQUIRED.

NAME OF STUDENT _____ DATE OF BIRTH _____
(Last Name) (First Name)

ADDRESS _____

HOME PHONE _____

FATHER/MALE GUARDIAN _____ WORK PHONE _____

MOTHER/FEMALE GUARDIAN _____ WORK PHONE _____

EMERGENCY CONTACT PERSON _____ EMERGENCY NO. _____

NAME OF SCHOOL ATTENDING **2011-2012** (check one and indicate grade)

PUBLIC SCHOOL

| | |
|---|-------------|
| _____ Panther Valley Elementary School | Grade _____ |
| _____ Panther Valley Middle School | Grade _____ |
| _____ Panther Valley High School | Grade _____ |
| _____ Carbon Career & Technical Institute | Grade _____ |

NON-PUBLIC SCHOOL

| | |
|--------------------------------------|-------------|
| _____ Our Lady of the Angels Academy | Grade _____ |
| _____ Marian Catholic High School | Grade _____ |
| _____ St. Jerome's | Grade _____ |
| _____ Other (Please indicate) | Grade _____ |

BUS STOP LOCATION FOR **2011-2012** SCHOOL YEAR _____

****IF THIS IS A CHANGE OF BUS STOP
PLEASE INDICATE OLD STOP**

_____ CHECK IF NO TRANSPORTATION IS NEEDED

I ACKNOWLEDGE RECEIPT OF THE PANTHER VALLEY BUS POLICY AND UNDERSTAND THE TERMS AND CONDITIONS OF THE POLICY

Parent/Guardian Signature

Date

NOTE: KEEP ATTACHED COPY OF BUS STOPS AND POLICY FOR YOUR REFERENCE.

