

WILKES-BARRE AREA SCHOOL DISTRICT

730 South Main Street

Wilkes-Barre, PA 18711-0375

Linda Dane, Transportation Coordinator

TRANSPORTATION REQUEST FOR THE 2010-11 SCHOOL YEAR

At this time, the following information is required to be completed for each school-age child residing in the Wilkes-Barre Area School District, who qualifies for and needs transportation to/from school for the 2010-11 school year. You may list multiple children within the family on one form, as long as they are all in the same school. If one student in the family is attending or will be attending another school, please fill out a separate form for that particular student.

(Last Name),	(First Name)	Sex: _____	DOB: _____	Grade: _____
_____	_____	Sex: _____	DOB: _____	Grade: _____
_____	_____	Sex: _____	DOB: _____	Grade: _____
_____	_____	Sex: _____	DOB: _____	Grade: _____

Current School: \_\_\_\_\_

2010-11 School: _____	2010-11 Grade: _____
_____	2010-11 Grade: _____
_____	2010-11 Grade: _____
_____	2010-11 Grade: _____

Current Transportation:

To School: Bus # & Company: \_\_\_\_\_

Pick Up Location: \_\_\_\_\_

From School: Bus # & Company: \_\_\_\_\_

Drop Off Location: \_\_\_\_\_

Transportation is needed for 2010-11: YES \_\_\_\_\_ (circle one) (to / from / both) NO \_\_\_\_\_

Student(s) Address: \_\_\_\_\_

City/Zip Code: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Parent(s) / Guardian(s): \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip Code: \_\_\_\_\_

Phone Number(s): (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Emergency Contact & Phone No.: \_\_\_\_\_

List any changes that may occur in the student(s) address, etc. before the start of the 2010-11 school year: \_\_\_\_\_

Person who completed this form: \_\_\_\_\_ Date: \_\_\_\_\_

**IMMEDIATELY RETURN THIS COMPLETED FORM TO THE TRANSPORTATION DEPT, Wilkes-Barre Area School District, 730 South Main St., Wilkes-Barre, PA 18711-0375.**