

TRANSPORTATION REQUEST FORM

Student name(s)	Rural A.M. pick up	Rural P.M. drop off	Grade	District shuttle
	Y / N	Y / N		Y / N
	Y / N	Y / N		Y / N
	Y / N	Y / N		Y / N
	Y / N	Y / N		Y / N

Home information

Name of parent(s)/legal guardian(s) _____

Physical address _____

Home phone (____) _____ Emergency contact phone (____) _____

The district cannot pick up or drop off at any Eudora city addresses. A district shuttle will run according to the school schedule each day, with drop-off and pick-up points at each school, as well as the parking lot at 9th and Main, south of the Eudora Public Library. This shuttle is available at no charge to students who have a Transportation Request Form on file. For more information about the shuttle, call the operations office at 542-4900.

Rural day care provider or other rural pick-up/drop-off address

Will the bus PICK UP the student(s) at this address? yes no

Will the bus DROP OFF the student(s) at this address? yes no

Check one option: The student ***will*** ride every day, unless we call 542-4900 by 6:30 a.m.
 The student ***will not*** ride every day, unless we call 542-4900 by 6:30 a.m.

NOTE: Three (3) unsuccessful attempts to pick up a student will result in our buses no longer stopping at that address until we are contacted.

Name of person at rural pick-up/drop-off address _____

Relationship to student (day care provider, grandparent, etc.) _____

Physical address _____

Phone number of person at rural pick-up/drop-off address (____) _____

Consent of parent/legal guardian

I grant permission for the child(ren) in my care to use the transportation services of Eudora Schools. I understand that a student's use of district transportation is a privilege and subject to the rules and regulations as determined by district officials. I also understand that transportation privileges may be discontinued at any time for disciplinary reasons or for a failure to comply with the information submitted on this form.

Signature of parent/guardian _____ Date _____