



OAK HARBOR SCHOOL DISTRICT STUDENT TRANSPORTATION FORM 2/28/13

* Complete ONLY IF you are requesting Student Transportation

To help us plan our bus routes for this year, if you want student transportation, please complete and return this form to your child's school office. Regular transportation is provided only for students that live outside the 1 mile walker area. You will be notified by transportation if you meet eligibility requirements per current State Guidelines.

Contact Transportation at (360) 279-5570 if you have any additional questions or concerns.

Student Name _____ Date _____

Parent/Guardian _____ School _____ Grade _____

Date student will start school _____

Home address _____ Home phone _____

Pick-up Address _____ Pick-up phone _____

(Fill in only if different from home address – must be in your school's attendance area unless student is in special programs)

Drop-off address _____ Drop-off phone _____

(Fill in only if different from home address– must be in your school's attendance area unless student is in special programs)

Special Instructions _____

For car seat requirements (if required) Height _____ Weight _____

Point of Contact/Parent or Guardian _____ Phone(s) _____

FOR OFFICIAL USE ONLY – COMPLETE AT BUILDING:

- 1) If Pre-school student, please indicate: All Day ___ AM ___ PM ___
2) Kindergarten Schedule Full day ___ AM ___ PM ___
3) Food Service # _____
4) Once you have enrolled the student in Skyward, please forward this form to the transportation department

FOR OFFICIAL USE ONLY BY THE TRANSPORTATION DEPARTMENT

Student has been entered in Versa-Trans/Skyward ___ Yes ___ No
Bus Route Assigned _____ Driver Notified ___ Yes ___ No
Posted on School Bus Website ___ Yes ___ No
Parent notified ___ Yes ___ No

Special routing instructions: _____

Approved by: _____ File in Transportation Office