



COMPLETE AND RETURN THIS PAGE TO THE BUS DRIVER – PLEASE PRINT LEGIBLY

2018-2019

**THIS IS A REQUIRED FORM.**

Students Name: \_\_\_\_\_  
Last First Middle

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender: \_\_\_\_\_ B/Day: \_\_\_\_\_

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

Morning Pick-up Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Afternoon Drop-Off Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
Last First Phone #

Please list below any special health problems or instructions your driver needs to be aware of:

\_\_\_\_\_

To be completed by driver only:

Route ID #: A.M. \_\_\_\_\_ Transfer to/from: A.M. \_\_\_\_\_

Route ID#: P.M. \_\_\_\_\_ Transfer to/from: P.M. \_\_\_\_\_

I have received the transportation Student Conduct on Buses: \_\_\_\_\_  
Signature Date

***KINDERGARTEN Parent(s)/Guardian(s):***

For the safety of your kindergarten student and to assist the Durango 9-R Transportation Department in meeting parents/guardians needs, the District is requiring this form to be signed and return to your kindergarten student's bus driver.

Kindergarten's Student's Name: \_\_\_\_\_

Can your kindergarten student be dropped off at his/her scheduled stop without a parents/guardian present? Yes \_\_\_ No \_\_\_

If no, then who is authorized to meet your child:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature Date