

Yadkin County School Transportation Department

2016/17

School Bus Request and Deletion Form

Please check one box below.

New Bus Stop Request New Bus Stop Deletion Change of Bus Stop Request Change of Bus Stop Deletion

School and Code: Yadkinville Elementary School 336 Date: _____

Students Name: _____

Grade: _____ Social Security #: _____

Students 911 Address: _____

Mailing Address (if different than 911 address): _____

Home Phone #: _____ Parent Work #: _____

Transportation Address A.M. (house#) _____ Street Name: _____

Pick-Up

Transportation Address P.M. (house#) _____ Street Name: _____

Drop-Off

Name of Daycare to be transported for pick-up and/or drop-off: _____

Please circle which will be transportation time(s). Circle both if student is to be picked-up and dropped off at above daycare.

We must have the correct transportation address to provide transportation services.

Please indicate reason for change in transportation services: _____

Requestor's Signature: _____ Date: _____

OFFICE USE ONLY

It is state law that this information be reported to the Transportation Office within 10 school days from the date of change.

Please provide the Assistant Principal, Bus Coordinator, POWERSCHOOL Data Manager, and bus drivers with a copy of this information. This will keep everyone well informed of the changes being made with the bus routes within each school.

BUS # A.M. _____ BUS # P.M. _____

Assistant Principal/Bus-Cordinator Signature: _____

POWERSCHOOL Data Manager Signature: _____

Bus Driver Signature: _____

TIMS Data Manager Signature: _____