

Busing Information

New Registrations or Change of Address

If your child will be riding a school bus, the Medical Lake School District Transportation Department needs the following information. *(If pick-up and drop-off varies, please provide a more detailed schedule)*



Student Name <i>(Please print)</i>	Parent Name
Grade Level	Parent Phone
AM PM Kindergarten/Pre-School <i>(Circle One)</i>	
SCHOOL: MLES ANDERSON HALLETT MS HS <i>(Circle One)</i>	

PICK UP LOCATION(S):

(Home, Daycare, etc)

ADDRESS 1	ADDRESS 2 if needed	ADDRESS 3 if needed
ADULT NAME	ADULT NAME	ADULT NAME
PHONE NUMBER(S)	PHONE NUMBER(S)	PHONE NUMBER(S)
DAYS OF THE WEEK (please circle) M TU W TH F	DAYS OF THE WEEK (please circle) M TU W TH F	DAYS OF THE WEEK (please circle) M TU W TH F

DROP OFF LOCATION(S):

(Home, Daycare, etc.)

ADDRESS 1	ADDRESS 2 if needed	ADDRESS 3 if needed
ADULT NAME	ADULT NAME	ADULT NAME
PHONE NUMBER(S)	PHONE NUMBER(S)	PHONE NUMBER(S)
DAYS OF THE WEEK (please circle) M TU W TH F	DAYS OF THE WEEK (please circle) M TU W TH F	DAYS OF THE WEEK (please circle) M TU W TH F

Note: Parents of students registering after August 24 may be asked to transport their child until routing changes can be made. If you have unusual circumstances or special schedule concerns please e-mail Transportation@mlsd.org
Bus stops will be assigned as soon as possible, once the information is compiled.