



# ST PATRICKS BUS SHEET

## 2024-2025

**CHANGES TAKE A MINIMUM OF 3 WORKING DAYS TO PROCESS**

**PLEASE NOTE:** When a PERMANENT change needs to be made, a REVISED bus information sheet must be completed and returned to the school office, or emailed to Transportation at trans@dist50.net, or you may fill out a new bus sheet online at www.dist50.net.

### STUDENT INFORMATION

(PLEASE PRINT NEATLY; PLEASE FILL OUT COMPLETELY; 1 STUDENT PER FORM)

LAST NAME		FIRST		MI	
ADDRESS		APT #	CITY		ZIP CODE
HOME PHONE	AGE	GRADE	BIRTH DATE	SEX	
CHILD LIVES WITH (CIRCLE): PARENTS MOTHER ONLY FATHER ONLY STEP/GUARDIAN OTHER _____					
FATHER/GUARDIAN NAME			MOTHER/GUARDIAN NAME		
FATHER/GUARDIAN WK #			ALTERNATE #	MOTHER/GUARDIAN WORK #	
				ALTERNATE #	
FATHER/GUARDIAN EMAIL			MOTHER/GUARDIAN EMAIL		

PLEASE PROVIDE INFO FOR SOMEONE OTHER THAN YOURSELF

NAME & RELATIONSHIP:

EMERGENCY PHONE #:

**YOUR CHILD WILL BE ASSIGNED ONE STOP FOR PICK UP AND ONE FOR DROP OFF**

☐ PLEASE CHECK HERE IF YOU WANT THE STOP CLOSEST TO HOME

<b><u>ALTERNATE LOCATION</u></b>					
<b><u>BEFORE SCHOOL:</u></b>	M	T	W	H	F
NAME: _____					
ADDRESS: _____					
PHONE #: _____					
<b><u>AFTER SCHOOL:</u></b>	M	T	W	H	F
NAME: _____					
ADDRESS: _____					
PHONE #: _____					

IF YOUR START DATE EXCEEDS  
THE CUSTOMARY 3 DAYS PLEASE  
LIST YOUR DESIRED START DATE  
HERE



DESIRED START DATE

\*\*\*\*\*DOES YOUR CHILD HAVE ANY MEDICAL CONDITIONS THAT THE BUS DRIVER SHOULD KNOW?\*\*\*\*\* (THESE WILL BE KEPT STRICTLY CONFIDENTIAL)



PARENT / GUARDIAN SIGNATURE

DATE

### DISTRICT USE ONLY

NEW \_\_\_\_\_ REVISED \_\_\_\_\_

SCHOOL RECEIVED DATE: \_\_\_\_\_

TRANSPORTATION START DATE: \_\_\_\_\_

DATE PARENT NOTIFIED: \_\_\_\_\_

POR RECEIVED : \_\_\_\_\_

<https://versatransweb04.tylertech.com/woodland/elinkrp/Login.aspx>

"Don't forget to download our new MY STOP APP by Versa Trans on your mobile phone.

"<https://versatransweb04.tylertech.com/woodland/onscreen/mystop/loginmobile.aspx>

