Glen Ellyn School District 41

STUDENT TRANSPORTATION INFORMATION FOR 2009-10 – HADLEY JR. HIGH

To be filled out for ALL students, one child per form. (*If information changes during school year, you must fill out new form).*

Please print

STUDENT NAME (Last, First) _____ 2009-10 Grade _____

STUDENT ADDRESS _____

SCHOOL ATTENDING _____

Parent Signature _____Date _____

Check any square that applies to your child: ***Circle days that apply***

- ❑ walk to school from home M T W Th F
- ❑ walk from school to home M T W Th F
- ❑ parent/adult transport to school from home M T W Th F
- ❑ parent/adult transport from school to home M T W Th F

Adult Name _____

- ❑ walk to school from sitter M T W Th F
- ❑ walk from school to sitter M T W Th F
- ❑ ride on school bus from sitter to school M T W Th F
- ❑ ride on school bus from school to sitter M T W Th F

Sitter's Name _____ Phone _____

Sitter's address _____

- ❑ day care will transport to school M T W Th F
- ❑ day care will transport from school M T W Th F

Day Care Name _____ Phone _____

Day Care Address _____

- ❑ School bus will transport from home to school M T W Th F
- ❑ School bus will transport from school to home M T W Th F

BUS ROUTES WILL BE POSTED AT HADLEY START-UP DAY

Please sign: I have read the Bus Ridership Policy on the wrapper and reviewed it with my child.

Parent Signature_____ Date_____

Student Signature _____ Date _____

FORM #4