

RIDGEVIEW TRANSPORTATION CHANGE

	EFFECTIVE DATE OF CHANGE: _	
STUDENT'S N	AME (PLEASE PRINT):	
	GRADE LEVEL:	TEACHER:
	STUDENT RIDES BUS NU	MBER:
MONDAY: () BUS home () C	Car Rider ()Daycare/Other:	
		(please specify)
TUESDAY: () BUS home () C	ar Rider ()Daycare/Other:	
<u>WEDNESDAY:</u> () BUS home () Car Rider()Daycare/Other:_	
PLEASE NOTE THAT STUDENTS ARI	E DISMISSED AT 2:15 PM EVERY W	'EDNESDAY
THURSDAY: () BUS home ()	Car Rider ()Daycare/Other:	
FRIDAY:() BUS home () Car	Rider ()Daycare/Other:	

Parents – It is our understanding that your child will ride their assigned bus home. If your child will **not** be taking their assigned bus home after school, please complete this form and return it to the school office. Should any last minute transportation changes happen please contact the school office at 309-692-8260 no later than one hour before the end of the school day.

Please note that Kindergarten parents need to be at the bus stop to help get their kindergarteners from the bus at the end of each day.

PARENT SIGNATURE:
