

# DUAL RESIDENCE FORM

*In the event a student needs bus service to and from two different addresses due to dual residence, then the form below must be completed and signed by both parents and returned to the Centerville City Schools Transportation Department. If a student is in kindergarten, please indicate whether he/she is morning, afternoon or all day. Please print legibly!*

School: \_\_\_\_\_ Name: \_\_\_\_\_ GR: \_\_\_\_\_

School: \_\_\_\_\_ Name: \_\_\_\_\_ GR: \_\_\_\_\_

School: \_\_\_\_\_ Name: \_\_\_\_\_ GR: \_\_\_\_\_

School: \_\_\_\_\_ Name: \_\_\_\_\_ GR: \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Days Student is at Mother's House:** \_\_\_\_\_

*(if dates and times change frequently, please attach a calendar with the students schedule)*

Mother's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Father's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Days Student is at Father's House:** \_\_\_\_\_

*(if dates and times change frequently, please attach a calendar with the students schedule)*

Father's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

RETURN FORM TO YOUR STUDENT(S) SCHOOL OF ATTENDANCE

*For office use only –*

Bus To Mother's: AM \_\_\_\_\_ MID \_\_\_\_\_ PM \_\_\_\_\_ TRANS \_\_\_\_\_

Bus To Father's: AM \_\_\_\_\_ MID \_\_\_\_\_ PM \_\_\_\_\_ TRANS \_\_\_\_\_