

# Lockwood Elementary

## 2020-2021

### STUDENT TRANSPORTATION INFORMATION

Please complete this form and return to school ASAP.

Student Name	Grade
Teacher Name	Room
Home Address	Phone
Parent Name	Work Phone
Daycare Provider	Phone
Daycare Address	

**Normal Transportation to School:**

(√)

	Comes from home		Walks		Car		School Bus	#
	Comes from daycare		Walks		Car		School Bus	#

**Normal Transportation from School:**

For safety reasons it is very important that we know where a student is to go after school and how they are to get there. Please indicate the normal pattern your child will be following each day of the week.

Goes Home	Check Days	√	Walks	√	Car	√	School Bus #	T-?
	Mon.							
	Tues.							
	Wed.							
	Thurs.							
	Fri.							

Goes To Daycare	Check Days	√	Walks	√	Car	√	School Bus #	T-?
	Mon.							
	Tues.							
	Wed.							
	Thurs.							
	Fri.							

If your child needs to deviate from the going home procedure indicated, you will need to send a note on those days giving specific directions.

\_\_\_\_\_  
Parent Signature