

FOR OFFICE USE ONLY

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PHASE _____ MON/TUE _____ WED/THU

Please fill out completely and return to ECC.
CLINTON COUNTY BUS GARAGE (606) 387-5276
PRESCHOOL BUS INFORMATION SHEETS

*****Fill out a separate sheet for each student.
SECTION 1: STUDENT INFORMATION (PLEASE PRINT CLEARLY)**

STUDENT NAME _____ GRADE _____ MALE _____ FEMALE _____
NAME OF PARENT OR GUARDIAN _____
STREET ADDRESS (NO PO BOX NUMBERS) _____
CITY _____ STATE _____ ZIP _____
PHONE # AT HOME _____ CELL # _____ CELL # _____
EMERGENCY PHONE # _____ NEIGHBOR PHONE # _____

SECTION 2: TRANSPORTATION INFORMATION

_____ CHECK HERE IF STUDENT WILL **NOT** BE RIDING THE BUS. (SKIP TO SECTION 3: MEDICAL INFORMATION)

IF YOUR CHILD WILL BE RIDING THE BUS TO SCHOOL PLEASE COMPLETE THIS SECTION

WILL STUDENT BE PICKED UP AT: _____ HOME _____ OTHER LOCATION (Please fill out information below)

PARENT/GUARDIAN _____ PHONE _____

STREET ADDRESS _____

IF YOUR CHILD WILL BE RIDING THE BUS TO HOME/OTHER LOCATION PLEASE COMPLETE BELOW

WILL CHILD BE DROPPED OFF AT: _____ HOME _____ OTHER LOCATION (Please fill out information below)

PARENT/GUARDIAN _____ PHONE _____

STREET ADDRESS _____

IF STUDENT HAS RELATIVE ON THIS BUS, PLEASE LIST NAME WITH GRADE LEVEL:

I have read and understand the student rules and regulations for the 2019-2020 school year.

Parent or Guardian Signature

Date

Please complete sections 3 and 4 on reverse side →

SECTION 3: MEDICAL INFORMATION

ARE THERE ANY SPECIAL MEDICAL PROBLEMS THE DRIVER SHOULD KNOW ABOUT?
(SUCH AS ALLERGY TO BEE STINGS, EPILEPSY, ASTHMA, ETC.) YES ___ NO ___

IF YES, PLEASE EXPLAIN _____

PLEASE ADD ANY FINAL COMMENTS FOR THE DRIVER: _____

SECTION 3: RELEASE INFORMATION

NAME OF PERSON DRIVER MAY DROP CHILD OFF WITH:

1. _____ RELATIONSHIP _____

ADDRESS/PHONE # _____

2. _____ RELATIONSHIP _____

ADDRESS/PHONE # _____

3. _____ RELATIONSHIP _____

ADDRESS/PHONE # _____

4. _____ RELATIONSHIP _____

ADDRESS/PHONE # _____

5. _____ RELATIONSHIP _____

ADDRESS/PHONE # _____

DO NOT WRITE BELOW THIS LINE PLEASE

TO BE COMPLETED BY TRANSPORTATION OFFICE

AM

MID

PM
