School District 197 Bus Registration

Registration Form Due August 1, 2024

Who Needs to Register for the Bus?

- All students new to the district
- All previously registered students who have had an address change or daycare change
- All non-public school students
- All new out of district open enrolled students.

BUSTRANSPORTATION IS AVAILABLE TO:

- Elementary school students (grades K-4) who live more than 0.75 mile from school
- Middle school students (grades 5-8) who live more than I mile from school
- High school students (grades 9-12) who live more than 2 miles from school

REGISTRATION PROCESS:

- Students will not be listed for bus service in the fall unless the Transportation Office receives a completed registration form on or before August 1.
- Forms received after August I will be put on hold. Students may not have bus service for the first two weeks of school or may be transported home by van (elementary) or asked to use the Academic/Activity Bus (middle and high school) until they are assigned a route. Transportation requests received after the first two weeks of school will be processed within 2-3 business days.
- Please only register for service when you are sure your child will be riding a bus.
- Complete one form per child.
- By registering for transportation services you are agreeing to comply with our policies and procedures, which can be found on the district website at isd197.org/district/school-board/policy-manual
- All students (grades K-12) are dropped off at their stop location regardless of whether a parent/guardian is present.
- Return this form to your school's main office. If school is not in session, mail form to District Transportation, 1145 Medallion Drive, Mendota Heights, MN 55120, or email form to transportation@isd197.org. Do not mail it to your school during the summer. This form can be found at isd197.org/bus.
- Postcards with bus information are mailed to homes in late August. If you have questions, please call 651-403-8320.

Student Name:			Student ID#:
Street Address:			Home Phone:
City/State/Zip Code:			Cell Phone:
Date of Birth:			
Student's School in 2024-25:			Grade in 2024-25:
Parent/Guardian Name:		Email:	
Secondary/Emergency Contact:			Contact Phone:
When will the student ride? (C	heck one or both)	AM 🛛 PM	
Does your child have any special health needs or concerns? If so, please describe.			
, , , ,	••	l drop off must be five day	rs each week at the same location.
AM and PM may be different lo			
Daycare Provider's Name:			Phone:
Daycare Address:			
To School: (Choose only one):	Pick up from home	Pickup from daycare	Extended Day (School Age Care)
From School:	Drop at home	Drop at daycare	Extended Day (School Age Care)