



# Application for Metro Ride Transportation

Date: \_\_\_\_\_

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CHANGE OF ADDRESS

Student name (last, first, and middle initial): \_\_\_\_\_

Previous address including city, state, and zip code: \_\_\_\_\_

New address including city, state, and zip code: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Parent/Guardian address (if different than student): \_\_\_\_\_

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NEW STUDENT

Student name (last, first, and middle initial): \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

Address including city, state, and zip code: \_\_\_\_\_

Parent/Guardian address (if different than student): \_\_\_\_\_

Home phone number: \_\_\_\_\_ Work number: \_\_\_\_\_ Cell number: \_\_\_\_\_

Grade student is entering: \_\_\_\_\_

School student will be attending: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Metro Ride Tickets \_\_\_\_\_

Distance from home to home school: \_\_\_\_\_

NOT APPROVED

REASON: \_\_\_\_\_