

GLASCOCK COUNTY SCHOOL BUS STUDENT ROSTER

For the safety of all students, we must have a roster with certain information on each student. Student roster information must be kept on the bus at all times. The information given is confidential and will not be shared with anyone except Board of Education staff, Medical and Law Enforcement personnel. Please complete the following information on each student that you have riding a bus.

PLEASE RETURN THIS COMPLETED FORM TO YOUR BUS DRIVER TOMORROW.

The absolute deadline for the driver to receive this completed form is two weeks from the time your child begins riding a school bus.

Student's Name: _____

Date of Birth: _____

Grade: _____

Home Telephone #: _____

Cell #: _____

Emergency Telephone #: _____

AM Bus # (if known) _____

Address where student is to be picked up by bus in the A.M.

PM Bus # (if known) _____

Address where student is to be dropped off by bus in the P.M.

Any special Medical condition driver may need to know about: (seizures, asthma, etc.)

Any special medical devices your child must have in his/her possession: (Inhaler, Epipen)

Parent/Guardian's Name (Please Print) _____

Parent/Guardian's Signature: _____

Date: _____

If you have questions regarding assigned bus stops, please call Scott Usry at 706-598-2291. If you need to change assigned bus stops, please call Melissa Rogers or Shellie Newsome at 706-598-2121.