

School Contact/Transportation Information

Akron Public Schools is striving to provide excellent service to all those that we serve. We require the following information from you. Please note this information is required by all schools that we provide ANY type of transportation services to, including PIL. As we move forward, we will be looking at all the services we provide to every school that requests it. The transportation services to your school may change. **Any additional contacts please list on the BACK of this form.**

Please complete the following by **April 1, 2022** and return to:

Akron Public Schools
Student Services /Transportation
Attn: Ramona Carroll, Rm 513
10 North Main Street, Akron, OH 44308

By Email: transft@apslearns.org
By Fax: 330.761.3224

GRADE LEVELS TAUGHT: _____

School Name: _____ School Contact Number: _____

School Address: _____ City/Zip Code: _____

SUMMER CONTACT INFORMATION/DESIGNEE

Should we need to contact someone over the summer regarding transportation service issues, please provide at least one, preferably two, contact personnel.

Name/Title: _____ Email: _____ Number: _____

Name/Title: _____ Email: _____ Number: _____

AFTER HOURS CONTACT INFORMATION

Should an incident happen after normal school hours, we need at least one, preferably two, contact personnel.

Name/Title: _____ Email: _____ Number: _____

Name/Title: _____ Email: _____ Number: _____

VIEWFINDER ACCESS

Who would you like to have access to view routing information for your students? We require at least one, if not two, personnel that will be responsible for reviewing information in this program.

Name/Title: _____ Email: _____

Name/Title: _____ Email: _____

DISCIPLINE ISSUES

All students are subject to Akron Public Schools transportation discipline guidelines. We need to know who handles discipline issues for your school. We require at least one, if not two, personnel.

Name/Title: _____ Email: _____

Name/Title: _____ Email: _____

ALL-CALL LISTING

Akron Public Schools does not provide Transportation Services when we are closed for a calamity day. In the event of a calamity day, we require contact personnel. Please provide at least one, if not two, contact personnel.

Name/Title: _____ Name/Title: _____

Email: _____ Email: _____

Number: _____ Number: _____

Add'l Number: _____ Addt'l Number: _____

SCHOOL INFORMATION (per 3327.016, start and end times must be turned in no later than April 1st of the current school year)

Please provide the following information to help us in providing transportation services for your school:

First Day of School: _____ Last Day of School: _____

Start of Day Bell Time: _____ End of Day Bell Time: _____

*AM Drop-off Time Range: _____ *PM Pick-up Time Range: _____

***Earliest AM Drop-off times**

***Latest Pick-up times**

Please return this form along with your school calendar for the 2022-2023 school year! Thank You!