

Boone County Schools

2023-2024 Student Transportation Form

School: _____ School Code: _____ T Code _____ School Year: _____

Gender: _____ Grade: _____ Student ID: _____ Teacher: _____

Student Name: _____ D.O.B _____

All students will be routed to their home address unless an alternative address is provided.

Home Address: _____

City/State/Zip: _____

Parent/Guardian: _____ Phone: _____

Parent/Guardian: _____ Phone: _____

BUS TRANSPORTATION NEEDED YES ___ OR NO ___ IF YES, CHOOSE OPTION(S) BELOW

- BUS TRANSPORTATION TO SCHOOL (AM) ONLY
- BUS TRANSPORTATION FROM SCHOOL (PM) ONLY
- BUS TRANSPORTATION TO & FROM SCHOOL (AM&PM) *

**Per District Policy, students are permitted ONLY 1 AM and 1 PM Drop Off and Pick Up
NO ALTERNATE DAYS**

ALTERNATE PICK-UP AND/OR DROP-OFF LOCATION NEEDED (Must be inside school boundaries)

If using an alternate address, please provide the following:

Pick-up Location: _____

Drop-off Location: _____

Student Transportation Information To be Completed by School Official Only

AM Pick-up Information:

Bus # _____ . Stop Location: _____

PM Drop-off Information:

Bus # _____ . Stop Location: _____
