Thief River Falls School District #564 Transportation Form Forms must be turned in by August 9th, 2024

1. Only written request will be honored. (Please Print)

Student's Name:	ame:						ide:	Pi	Pre School AmPm			
Parent/Guardian's Name:								S	chool_			
Address:												
							Cell Phone:					
Picked up at home: Yes No No bussing, Parent Transport												
TO SCHOOL: (If chil	d is to	ha n	ickad	un at	a loca	ation (othor	than th		ase chec		
TO SCHOOL: (If child is to be picked up at a location other than the home bus stop.) Name of childcare provider: Home Phone												
rame or emideate pro-										<u> </u>		
Address of childcare provider:								_Cell p	hone			
PLEASE CHECK DAYS YOU NEED TRANSPORTATION												
	Mon.		Tue.		Wed.		Thur.		Fri.			
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM		
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	()	()	()	()	()	()	()	()	()	()		
								ı	No buss	ing, Par	ent transport	
Dropped off at home: YesNo												
Please check box												
FROM SCHOOL: (If child is to be dropped off at a location other than the home bus stop.)												
Name of childcare provider:Home Phone												
Address of childcare provider:Cell phone												
							RANSF					
	Mon.		Tue.		Wed.		Thur.		Fri.]	
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	-	
	()	()	()	()	()	()	()	()	()	()		
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Signature:									_ Dat	te:		

Childcare Transportation

Please read the following regulations regarding requests for pick up and drop off at childcare locations.

New applications must be completed every school year for each child.

Request to change your childcare location must be made in writing on a new application five (5) school days in advance for processing before Transportation will begin if approved.

You must notify the childcare provider of the time and schedule.

Pick up and drop off addresses may be different from each other but must remain consistent five days per week. For safety reasons, the district will not make <u>one</u> <u>day or short term changes in bus stops</u>.

Students may be released from the school bus at only two points, the assigned bus stop or at the school, except in emergency. The parent or guardian shall designate a location to be their student's AM bus stop and a location for PM bus stops. Stops must be in the attendance area of #564 and may be a daycare, residence or respite care.

Independent School District #564
Transportation Department

Phone: 218-681-7077 Fax: 218-681-3820



TRF School Bus