

AUSTINTOWN LOCAL SCHOOL DISTRICT 2024-2025

Transportation

AUGUST '24							FEBRUARY '25								
S	M	T	W	Th	F	S	S	M	T	W	Th	F	S		
				1	2	3							1		
4	5	6	7	8	9	10	2	3	4	5	6	7	8		
11	12	13	14	15	16	17	9	10	11	12	13	14	15		
18	19	20	21	22	23	24	16	17	18	19	20	21	22		
25	26	27	28	29	30	31	23	24	25	26	27	28			
SEPTEMBER '24							MARCH '25								
S	M	T	W	Th	F	S	S	M	T	W	Th	F	S		
													1		
1	2	3	4	5	6	7	2	3	4	5	6	7	8		
8	9	10	11	12	13	14	9	10	11	12	13	14	15		
15	16	17	18	19	20	21	16	17	18	19	20	21	22		
22	23	24	25	26	27	28	23	24	25	26	27	28	29		
29	30						30	31							
OCTOBER '24							APRIL '25								
S	M	T	W	Th	F	S	S	M	T	W	Th	F	S		
			1	2	3	4	5				1	2	3	4	5
6	7	8	9	10	11	12	6	7	8	9	10	11	12		
13	14	15	16	17	18	19	13	14	15	16	17	18	19		
20	21	22	23	24	25	26	20	21	22	23	24	25	26		
27	28	29	30	31			27	28	29	30					
NOVEMBER '24							MAY '25								
S	M	T	W	Th	F	S	S	M	T	W	Th	F	S		
					1	2					1	2	3		
3	4	5	6	7	8	9	4	5	6	7	8	9	10		
10	11	12	13	14	15	16	11	12	13	14	15	16	17		
17	18	19	20	21	22	23	18	19	20	21	22	23	24		
24	25	26	27	28	29	30	25	26	27	28	29	30	31		
DECEMBER '24							June '25								
S	M	T	W	Th	F	S	S	M	T	W	Th	F	S		
1	2	3	4	5	6	7	1	2	3	4	5	6	7		
8	9	10	11	12	13	14	8	9	10	11	12	13	14		
15	16	17	18	19	20	21	15	16	17	18	19	20	21		
22	23	24	25	26	27	28	22	23	24	25	26	27	28		
29	30	31					29	30							
JANUARY '25							July '25								
S	M	T	W	Th	F	S	S	M	T	W	Th	F	S		
			1	2	3	4			1	2	3	4	5		
5	6	7	8	9	10	11	6	7	8	9	10	11	12		
12	13	14	15	16	17	18	13	14	15	16	17	18	19		
19	20	21	22	23	24	25	20	21	22	23	24	25	26		
26	27	28	29	30	31		27	28	29	30	31				

Student Name:
School:
Grade:
Parent Information:
Mother's Name:
Mother's Address:
Phone:
Cell:
Home:
Work:
Father's Name:
Father's Address:
Phone:
Cell:
Home:
Work:
Residential Parent:
Mother
Father
APPROVED:
By Office: / / Initial:
By Board: / / Initial: