

FILL OUT THIS FORM FOR TRANSPORTATION REQUESTS

Westerly School Department

Please forward this form to:

Westerly Public Schools

Attention: Transportation Coordinator

8 Springbrook Road

Westerly, RI 02891 FAX 401-348-9450

(Or Email to transportation@westerly.k12.ri.us (subject line: TRANSPORTATION REQUEST))

SCHOOL ATTENDING:

School Year:

Grade:

Student's Date of Birth

Student's Gender Identity

Student's Name:

Parent/Guardian #1 Name:

Cell Phone:

Home Phone:

Parent/Guardian #2 Name:

Cell Phone:

Home Phone:

Transportation Address:

Please Check Required Transportation Below

AM: _____ PM: _____

IF STUDENT IS NOT REGISTERED IN WESTERLY OR HAS HAD A CHANGE OF ADDRESS, PARENT OR GUARDIAN MUST CONTACT CENTRAL REGISTRATION OFFICE AT 401-315-1502 TO SET UP AN APPT. FOR ADDRESS VERIFICATION.

NOTE: * Bus Stops are determined by nearest existing bus stop. Any special requests must go through the Transportation Department at 401-348-9430.**

Emergency Contacts

Contact #1

Contact #2

Name:

Name:

Cell Phone:

Cell Phone:

Home Phone:

Home Phone:

Medical Information

Allergies/Special Health Considerations:

Parent/Guardian Signature:

Date: