**4 -YEAR OLD'S ONLY**

**Office Use Only**: Student Id #: _____

Start Date: _____

☐ New Request ☐ Change in Original Request

# Preschool Transportation Form

Transportation is available on a limited basis for 4-year-old preschool students. Requests will be prioritized based on need. Bus transportation may be available for students whose home or daycare address falls within the school boundary area.

***Important to note that preschool children may be transported with K-5 students***

## Student Information

| First Name: | Middle Initial: | Last Name: |
|---|---|---|
| | | |

## Parent Information

| First Name: | Last Name: | Main Phone #: |
|---|---|---|
| | | |
| **Work Phone #:** | **Email Address:** | |
| | | |

**Please indicate what SCHOOL and CLASS your child is enrolled in below**

| My Child's School | |
|---|---|
| ☐ | Hilltop Elementary |
| ☐ | Pine Bend Elementary |
| ☐ | Salem Hills Elementary |

| My Child's Class | | |
|---|---|---|
| ☐ | Monday - Friday AM | 7:50 AM - 10:30 AM |
| ☐ | Monday - Thursday PM | 11:45 AM - 2:30 PM |
| ☐ | Monday - Friday ALL DAY | 7:50 AM - 2:30 PM |

**Please circle your transportation choices below**

**My Child will Ride Bus to/from Home address these days**

To School: ☐M ☐T ☐W ☐Th ☐F

From School: ☐M ☐T ☐W ☐Th ☐F

**Ride Bus to/from Daycare on these days**

To School: ☐M ☐T ☐W ☐Th ☐F

From School: ☐M ☐T ☐W ☐Th ☐F

**No Bus Transportation- Parent pick up/drop off on these days**

To School: ☐M ☐T ☐W ☐Th ☐F

From School: ☐M ☐T ☐W ☐Th ☐F

Daycare Provider Name: _____

Daycare Provider Phone #: _____

Daycare Provider Address: _____
(Street Address)

_____
(City, State, Zip Code)

## Parent Acknowledgement

- I understand that before school, it is my responsibility to make sure my child is safely escorted to the bus stop and someone remains with them until the bus arrives.
- I understand it is my responsibility that after school someone is waiting at the bus stop to get my child off of the bus.

| Parent/Guardian Signature: | Date: |
|---|---|
| | |

**Return form to the IGH Early Learning Center**

**3203 68th St E, Inver Grove Heights 55076 / Fax: 651-306-7521 / Email: Preschool@isd199.org**

It will take approximately two weeks for any change to go into effect. The Early Learning Office will contact you once the transportation department has completed the request.

Revised 12/19/2023