PICKERINGTON LOCAL SCHOOL DISTRICT KINDERGARTEN STUDENT INFORMATION

PETERMANN TRANSPORTATION

12475-A ACHIEVEMENT WAY PICKERINGTON, OHIO 43147 (614) 837-8525 (614) 837-9485 FAX

STUDENT NAME:	HOME PHONE:		
SCHOOL:		BIRTHDAY	GENDER
PARENT(S)/GUARDIAN NAMES:	PLEASE PRINT INFORMATI	ON	
ADDRESS:	CITY:		ZIP
MOTHER'S WORK #:	FATHER'S WORK #:		
MOTHER'S CELL#	FATHER'S CELL#:		
PARENT/GUARDIAN SIGNATURE (Typed	name serves as your signatu	ire)	
		DATE:	
	ve one mile or more from the child will be assigned, mark	what your needs wou an "X".)	uld be for both sessions
AM SESSION PICK-UP: YES AM SESSION DROPOFF: YES	NO	MTW	THF /THF
PM SESSION PICKUP: YES PM SESSION DROPOFF: YES	NO NO	MTW MTW	THF 'THF
(Complete below if transportation is needed a Babysitter's address:	from a sitter)		

PLEASE ALLOW 3 DAYS FOR PROCESSING BEFORE TRANSPORTATION CAN BE AVAILABLE