SOUTHERN LEHIGH SCHOOL DISTRICT

5775 MAIN STREET
CENTER VALLEY, PENNSYLVANIA 18034

PHONE: (610) 282-1030
FAX: (610) 282-0193

Office of Support Services

RideWithUs@slsd.org

REQUEST FOR TRANSPORTATION UNDER ACT 372

NON-PUBLIC SCHOOL STUDENTS

(Please complete a separate form for each student requiring bus transportation)

Student Name:_____

Non-Public School Name:_____Grade: _____

Gender: Male_____ Female_____ Date of Birth:_____

Home Address:_____

_____

Mother Information	Father Information
Name:_____	Name:_____
Home Phone #:_____	Home Phone #:_____
Cell Phone #:_____	Cell Phone #:_____
Email:_____	Email:_____
AM Transportation: _____yes _____no	Location:_____
PM Transportation: _____yes _____no	Location:_____

Emergency Contact Names & Phone Numbers (OTHER THAN PARENTS)

Name:_____ Phone Number:_____

Name:_____ Phone Number:_____

Parent(s) Signature:_____ Date:_____