Waverly-Shell Rock Community Schools
TRANSPORTATION FORM

To be eligible, high school students need to be greater than 3 miles from the attendance center and K-8 students need to be greater than 2 miles from attendance center. Any questions, please call the transportation office before August 10th at **319-352-5009.**

Student Name_____
(Last) **(First)**

Student's School_____ **Grade**_____

Parent/Guardian's Name_____

Home Address_____**Phone**_____

Work Phone_____

_____ **New to district**

Destination of Student Other Than Own Residence: (Please Check All That Apply)

_____ Child Care Facility
_____ Private Babysitter
_____ Pick Up/Drop Off only at home address

AM Pick Up _____
PM Drop Off _____

Additional Instructions:_____

_____

Name of Care Giver:_____

Address:_____**Phone**_____

Signature of Applicant:_____**Date**_____

For office use only

Action on request: **Approved**_____ **Denied**_____

Start Date _____ **Bus#**_____ **Shuttle Bus#**_____

_____
Director of Transportation