NORTH STAR CHARTER SCHOOL **Brown Bus Company: Phone #208-466-4181 Fax #208-466-2861**

KINDERGARTEN TRANSPORTATION FORM	Date you wish to have transportation begin:	

Is this student a new bus rider, returning (without changes) or are there updates that need to be made? Please check the correct box below..

New Bus Rider		Returning/No Changes		Address Change/Other	

Students Last Name:		**Students First Name:**	

Parent/Guardian Name/s:	

Phone #'s:	**Home ( )**	**Work ( )**	**Cell ( )**

Email Address(es):	

Home Address (must be a street address, not P.O. Box) Mailing Address (if different from Home Address)

Pick up Address (if different than Home Address) Drop Off Address (if different than Home Address)

Please circle answers:

Grade: KG	AM	PM	or	ALL DAY	**Sex:**	M	F	Birthdate:
Does this student have an IEP?			YES	NO	If yes, is transportation a part of IEP?		YES	NO

WHO IS **AUTHORIZED** TO MEET THE KG STUDENT AT THE BUS STOP (please be specific- names and relationship to student)

Name	Name	Name
Relationship	Relationship	Relationship
IS THIS STUDENT APPROVED TO GET OFF THE BUS WITH HIS/HER SIBLINGS, EVEN IF AN AUTHORIZED PERSON IS NOT PRESENT? **YES** OR **NO**		

OTHER CONTACT PERSON(S): EMERGENCY PHONE #'S: RELATIONSHIP TO STUDENT:

Parent/Guardian Signature: **Todays Date:**

OFFICE USE ONLY:

BUS #:		Pick-Up Location:		Pick Up Time:	
BUS #:		Drop-Off Location:		Drop Off Time:	

School Notified By:		Date:	Parent Notified By:	
Driver Notified By:		Date:		
Map Updated (if applicable) By:		Date:	Route List Updated By:	

Please allow Brown Bus 48 hours to process your students transportation form- Thank you!

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