Arkansas City Public Schools

Student Transportation Information Form

	Living within 2.5 miles from home school
	Living over 2.5 miles from home school

School Year: 2017-2018

Please complete and mail or deliver this form to your school or the District Office

Students

AM or PM

Student	Grade	Birth Date	School

Home Information

Address	
Mailing Address	
Email	

Parent/Guardian Information

	Name	Home Phone	Cell Phone	Work Phone
Mother				
Father				
Guardian				

Day Care/Babysitter Information

Name	
Address	
Phone	

*** Please list any medical condition or concerns that the driver needs to be aware of pertaining to your child .**

Parent/Guardian Signature **Date**