REQUEST FOR BUS SERVICE NOAH WEBSTER SCHOOLS - MESA

For SY 2019-2020

Please fill out and return only if you are requesting bus service

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Leave blank

I am requesting consideration for busing and hereby authorize Noah Webster School to provide said busing. Furthermore, <u>I certify that my child (children) lives outside of a one (1) mile radius from the school site</u> and I understand that Noah Webster will not provide transportation to students within a one mile radius of the school.

I have read the Student Transportation Services letter and the Student Transportation Policy section of the parent handbook. And I understand that busing at Noah Webster is limited and that these limitations may result in a denial of bus service, and that this is a request only which in no way guarantees that I will be provided said bus service, and that all requests will be added to the transportation waiting list pending availability of bus service.

This Form is for requesting AM (Morning) pickup only

Please fill out the PM request form for afternoon busing

	Information)						
Parent/Guardian Printed Name (print clearly)			Signature (required)				
arent/Guardian Stre	eet Mailing Address			City	A	Zip	
-mail (this is optiona	al - to save postage costs for	or notifications)			I		
rimary contact phon	e Secondary contact phone T			Tertiary contact p	Tertiary contact phone		
Student Informat	tion - Please include eac	h child's full name: f	irst middle and la	ast)		(19-20 Yea	
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Student Name				Γ	Date of Birth	Grade Level	
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