



**BUS STUDENT INFORMATION**  
**SCHOOL DISTRICT 54 (BULKLEY VALLEY)**

In order to keep our system current and relevant we request the "Bus Student Information" form be completed at the beginning of each school year. Please note that all areas of the form are mandatory for accurate processing.

STUDENT(S) INFORMATION		SCHOOL	GR.	BIRTHDAY			GENDER	
				D	M	Y	M	F
1. Last Name:	First Name:						M	F
2. Last Name:	First Name:						M	F
3. Last Name:	First Name:						M	F

Residential Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Home Phone number: (     ) \_\_\_\_\_

**PARENT / GUARDIAN INFORMATION**

Mother's/Guardian name: contact information:	_____	Home Phone:	_____
	_____	Wk. Phone:	_____
	_____	Cell Phone:	_____
Father's/Guardian name: contact information, if different from mother :	_____	Home Phone:	_____
	_____	Wk. Phone:	_____
	_____	Cell Phone:	_____
Emergency Contact name: contact information:	_____	Home Phone:	_____
	_____	Wk. Phone:	_____
	_____	Cell Phone:	_____

**PARENT/GUARDIAN SIGNATURE (REQUIRED)** \_\_\_\_\_

Please indicate your anticipated use of the school transportation system for this coming year.

- |                                  |                                     |                                 |
|----------------------------------|-------------------------------------|---------------------------------|
| <input type="checkbox"/> Regular | <input type="checkbox"/> Occasional | <input type="checkbox"/> Seldom |
| <input type="checkbox"/> Regular | <input type="checkbox"/> Occasional | <input type="checkbox"/> Seldom |

**Maintenance Office Use Only**

<b>AM</b>		<b>PM</b>	
Route #:	_____	Stop #:	_____
Route #:	_____	Stop #:	_____
Route #:	_____	Stop #:	_____