

INTO GRADE _____

POCONO MOUNTAIN SCHOOL DISTRICT

STUDENT TRANSPORTATION FORM

NEW _____	Today's Date _____
CHANGE _____	Effective Date _____

Student _____
 Last Name _____ First Name _____ Middle Name _____

Sex _____ Race _____ Birthdate _____

O L D	Mailing Address _____	Physical Address _____
	Mailing Address _____	Physical Address _____

Mother _____ Home Phone _____ Work Phone _____

Father _____ Home Phone _____ Work Phone _____

LOCAL
 Emergency Contact _____ Relationship _____ Phone _____

DETAILED Directions to YOUR Home (Please give details - for example: Take Route 196 North to J Section entrance to PCP. Take Idlewild to Stony Hollow, make a right. Third house on right. Red two story house with white shingles.)

****ELEMENTARY ONLY** PLEASE NOTE: A KINDERGARTEN CHILD MUST BE MET AT THE BUS BY A PARENT OR OTHER AUTHORIZED PERSON. If your child will be picked up or delivered to a baby-sitter, day care, etc., someplace other than the home address, please complete the following in addition to the above.**

Baby-sitter / Relative / Neighbor / Day Care Pick Up _____ Deliver _____ Both _____
*****ELEMENTARY ONLY*****

Name _____ Phone _____

Location _____

	Bus #	Time	Stop Name	Stop ID
AM	_____	_____	_____	_____
PM	_____	_____	_____	_____