



TRANSPORTATION APPLICATION 2015-2016

Please return this form to your child's school by June 5, 2015. After that date, all forms must be submitted to the PACE Office located at 5815 Wise Road, Lansing, MI 48911 by July 31, 2015, to ensure transportation for the first day of school.

Student Information

Last Name: _____ First Name: _____ Grade: _____

Home Address: _____ City and Zip: _____

Mailing Address: _____ City and Zip: _____

Parent/Guardian #1 _____ Phone# _____

Parent/Guardian #2 _____ Phone# _____

Emergency Contact Name: _____ Phone# _____

Transportation Request: AM _____ PM _____ No Transportation is needed: _____

- *Please see other side of this form to request transportation to and/or from your child care provider.*
- *Your child's bus stop may not be the same as it was during the school year. We will be utilizing hub stops throughout the district.*
- *Riding the bus is a privilege not a right. I understand that my student must obey the rules at all times while riding the bus and at the bus stop. If the rules are not followed, my student may lose this privilege.*

Print Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

District Information – Office Use Only

Date Submitted to Ingham ISD: _____ (Fax# 517-676-4295 or email to transportation@inghamisd.org)

Ingham Intermediate – Office Use Only

Qualifies for Transportation Services: Yes _____ No Reason: _____

	Bus Stop	Route#	Animal & #	Parent Notified	Dean Trans. Notified
Morning:					
Afternoon:					