



Get Ready for Fall... Save Your Seat on the Bus!

Fill this out (Please Print), then sign and return this to your student's teacher by May 31, 2018



MINNEAPOLIS
PUBLIC SCHOOLS
Urban Education. Global Citizens.

Student Name _____ School now _____ Grade now _____

School in Fall _____ Student ID _____ Date of Birth _____

MAILING ADDRESS



Parent/Guardian _____

Street Address & Apartment _____

City, State, ZIP _____



Home Phone _____

Other Phone, Contact Name _____



Emergency contact outside home _____

Emergency phone _____

WILL THIS CHILD RIDE THE BUS? TO SCHOOL YES NO FROM SCHOOL YES NO

To School

Pickup address _____

Days: M Tu W Th F Varies

Alternate pickup if needed _____

Phone for alternate pickup _____

From School

Drop off address _____

Days: M Tu W Th F Varies

Alternate drop off if needed _____

Phone for alternate drop off _____

Parent/Guardian Signature _____

Date _____