HAMPDEN ELEMENTARY
TRANSPORTATION NOTICE

DATE _______________ GRADE _____ ROOM # __________

CHILD’S NAME ________________________________________

PARENT SIGNATURE ___________________________________

_____________________________________________________

TO SCHOOL:

BUS # _______ FROM _____________________________

(NAME)

BUS STOP LOCATION __________________________________

(www.cvschools.org/busstop)

FROM SCHOOL:

BUS # _______ TO _____________________________

(NAME)

ADDRESS _________________________________________

BUS STOP LOCATION __________________________________

(www.cvschools.org/busstop)

AFTER SCHOOL: PLEASE CIRCLE ONE

PARENT PICK- UP TUTORING

AFTER SCHOOL CLUB: __________________________________

(PLEASE FILL IN THE BLANK)

NAME OF PERSON PICKING UP MY CHILD / RELATIONSHIP

_____________________________________________________

PHONE NUMBER FOR ABOVE ___________________________