		Elmore C	ounty 911 School B	us Roster 2024-2025		
		circle one- AM/PM	circle one- 1st Run/2nd Run	ECAP/ICARE Kids- mark with**		
	Bus	# Driver	Area	Route #		
,	Time @	1st Stop Time @ L	ast Stop Time @ 1st S	School Time @ Last School_		
<b>Time</b>	Stop#	Stop Address	Home Address	Students Name	<b>Grade</b>	School
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Form T		ΟI	D	LIC	O.			OCT				
	SCHO		Sys			IUD	ENIK	081	ER Area-	Sch	ool Year- 2024-20	25
	Bus#	11001				ame-			AI Ca-		Route#	
1	Dus#	ı	D	TIVE	1511	anic-			Home	School	Routen	
	List Students	+	ΡΙ	ace o	ch	eck in a	ppropriate	hov	AM	PM	Shortened	Emergeny
	By			nce a	CII	Wheel	Restraint		Load	Load	School Day	Phone
Stop #	AM/PM Stops	A	B	C	D	Chair	System	Age	Time	Time	As Per IEP?	#
Stop #	AWI/I WI Stops	A	D	<u></u>	<u>v</u>	Chan	System	Age		:	Yes No	#
									:	:	Yes No	
+		+	1						:	:	Yes No	
		+							:	:	Yes No	
			1						:	:	Yes No	
+			1						:	:	Yes No	
+									:	:	Yes No	
		+	1	<del>                                     </del>				<del>                                     </del>	:	:	Yes No	
		+						<del> </del>	:	:	Yes No	
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		+						<del> </del>	:	:	Yes No	
		+						<del>                                     </del>	:	:	Yes No	
		+	1						:	:	Yes No	
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			Ī						:	:	Yes No	
		1	1						:	:	Yes No	

## **State Mandatory Student School Bus Information**

2024-2025

## PLEASE RETURN TO YOUR BUS DRIVER

## NO LATER THAN 5 DAYS FROM THE DATE OF BEING ISSUED WE MUST HAVE THIS ON FILE FOR YOUR CHILD TO RIDE AN

## ELMORE COUNTY SCHOOL BUS <u>IF NOT TURNED IN BY THIS DATE IT COULD RESULT IN LOSS OF BUS PRIVILEDGES</u>

UNTIL THE FORM IS COMPLETED!

Bus#:	Driver:	Re	oute#			
Student Name:		Grade:	School:			
Student Name:		Grade:	School:			
Student Name:		Grade:	School:			
Student Name:		Grade:	School:			
Parents or Guardia	n:					
Street Address:						
Home Number:		Work Number:				
Cell Number:		Other Number:				
<b>Emergency Number</b>	r 1:	Name:				
<b>Emergency Number</b>	r 2:	Name:				
emergency. If we d			ntact someone in case of an reach a parent or guardian this			
covered the rules wi	th my child/children. ne for violations of the	By signing this I am acknow	in the Student Handbook. I have ledging that my child is subject to is aware that he/she is esponsible			
Signature of Parent	ts/Cuardian	Dat	e			
Student Signature	.s/Guaruran	Dat	e			