

# Opp City Schools

## Transportation Form

School Year \_\_\_\_\_

**OES**

**OMS**

**OHS**

**Only fill out if you plan for your child to ride the bus!**

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Transportation Needed:

Pick Up \_\_\_\_\_ Drop Off \_\_\_\_\_ Both \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Telephone Number with area code (must be an active number) \_\_\_\_\_

**Important Note: To ensure the safety of your child, students are not allowed to change buses unless proper documentation is provided to the school. Each school will have a form that will need to be filled out prior to the bus change. Parents/Guardians will not be allowed to call or send a personal note to the school and request a bus change. All approved changes may have up to a two (2) day wait due to bus driver notification and possible route changes.**

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**Office Use Only**

Bus Color \_\_\_\_\_ Online Form Completed \_\_\_\_\_

Date the student will start riding the school bus \_\_\_\_\_