

**2014-15 STUDENT ARRIVAL AND DEPARTURE INFORMATION***Please return this form with your registration packet*

Grade: \_\_\_\_\_

BUS # \_\_\_\_\_

Please provide us with details of your arrival and departure travel arrangements so that we may assist your child. We will also use this information in the event an emergency takes place during arrival and dismissal times.

**It is REQUIRED that you inform the classroom teacher, in writing, or by phone if a last minute change in your routine occurs, even if only for one day.** Young children often get confused, so we will not allow them to make a change in arrival/dismissal routines. **Therefore, unless we hear from you directly, we will follow exactly what is on this sheet.** This is for your child's safety.

It is important that you review this information with your child. During dismissal, we generally do not ask or direct a child to a particular bus or location unless they seem lost, or ask us for help. Every child should know their bus number & stop, daycare provider, neighbor's name who will be picking them up, etc. If you are carpooling, it is important that we know who has permission to take your child home in the event of an emergency or last minute change due to inclement weather.

*Thank you for your assistance in following our arrival and dismissal procedures for your child's safety.*

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Student's Address: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Phone number to reach you: Before School \_\_\_\_\_ After school \_\_\_\_\_

**ARRIVAL TO SCHOOL PICK ONE OPTION ONLY**

- SCHOOL BUS  
 PARENT DROP OFF – **BY CAR OR OTHER VEHICLE**  
 WALKING  
 BY DAYCARE PROVIDER \_\_\_\_\_ Phone# \_\_\_\_\_

**DEPARTURE FROM SCHOOL PICK ONE OPTION ONLY**

- SCHOOL BUS  
 PARENT PICK-UP - **BY CAR or other vehicle**  
 WALKING  
 BY DAYCARE PROVIDER \_\_\_\_\_ Phone# \_\_\_\_\_

Please complete the weekly schedule **ONLY IF** modes of transportation will change on a daily basis.

|         | Monday | Tuesday | Wednesday | Thursday | Friday |
|---------|--------|---------|-----------|----------|--------|
| BUS     |        |         |           |          |        |
| PARENT  |        |         |           |          |        |
| WALKING |        |         |           |          |        |
| DAYCARE |        |         |           |          |        |

**CARPOOL: THE FOLLOWING PEOPLE HAVE PERMISSION TO PICK-UP MY CHILD FOR TRANSPORTATION PURPOSES:**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

**IMPORTANT: Please remember, unless we hear directly from a parent, we will follow exactly what is on this sheet.** If there is a permanent change, a new sheet may be obtained from the office.

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_