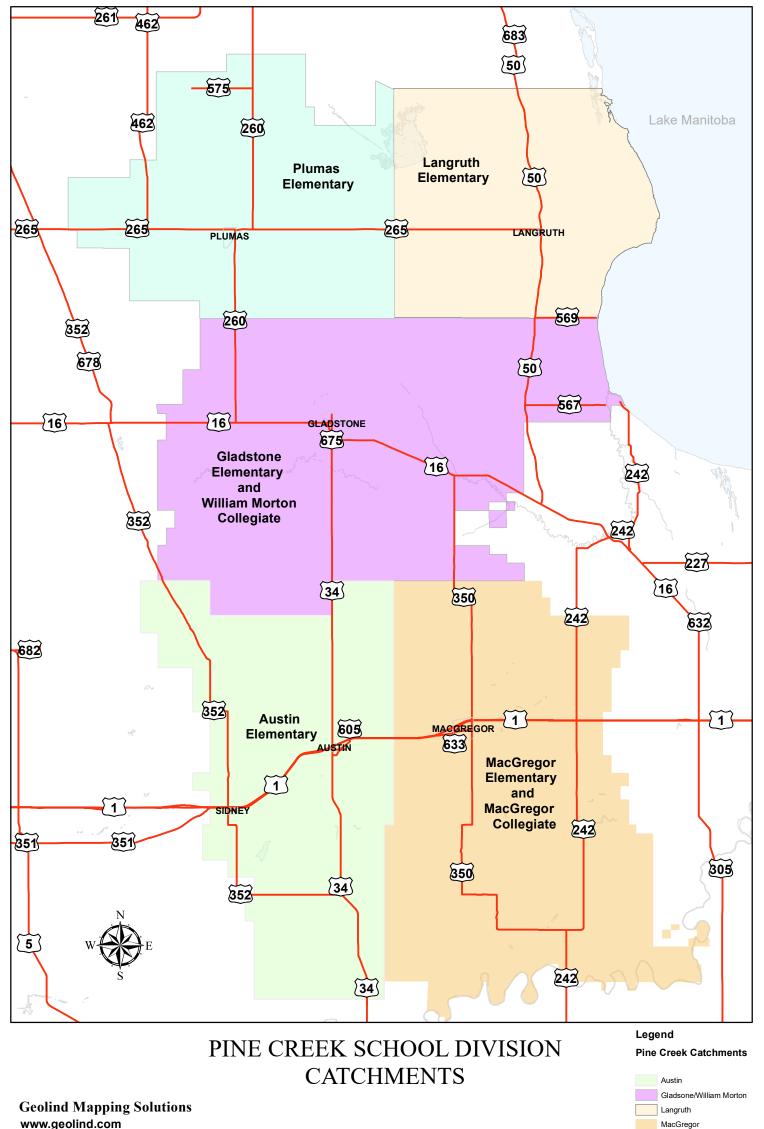
PINE CREEK SCHOOL DIVISION

STUDENT TRANSPORTATION REGISTRATION FORM

TO BE COMPLETED BY STUDENTS ENROLLED IN PINE CREEK SCHOOL DIVISION

PARENTS OR GUARDIANS - Please complete this form and return to your child's school or the Pine Creek School Division Transportation Office. It is important that the form is *completed in full and returned promptly*. If the student is eligible you will be contacted by transportation staff to indicate the specific information regarding transportation services for the upcoming school year.

STUDENT INFORM	IATION			
NAME (Surname) REGISTERED School Home Phone Number HOME ADDRESS – PICK UP ADDRESS (legal description or street address only)				(0)
			O d- (t)	(Given Name)
			Grade (current) Date of Birth	
	Example: 1	NW-8-24-18		
REQUESTED PICK UP / I Mailing Address (including code)		l description or street address only	·)	
Guardian's Name			Work Phone No.	
	(Surname)	(Given Name)	Alt. Phone No.	
Guardian's Name			Work Phone No.	
	(Surname)	(Given Name)	Alt. Phone No.	
SIBLING INFORMA	ATION	_		
Brothers and Sisters in order of age:			ate of Birth mm/dd/yy)	School/Grade Attending
PARENT/GUARDIA	N SIGNATURE			
criteria as determined by	mation on this form will to Manitoba Education & T	raining.	for transportation se	rvices if required, as well as for determining funding
☐ I request that my chi	ild receive transportation	services ☐ New A	opplication Effective I	Date:
	na receive transportation		pphoduon Encouve	
Parent/Guardian Signatu	ire		Date	
3				
				Revised September 2023
OFFICE USE ON	<u>llY</u>			Novidea deptember 2020
BUS #				
Transfer				
Initials				



Plumas

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