

**School District of Belleville**  
**Transportation Form**



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

Home Address: \_\_\_\_\_

**How will your student arrive at school in the morning?**

Please check how your student will arrive at school in the morning.

- BUS from home
- BUS from alternate destination
- WALK
- DROPPED OFF by parent/guardian
- DRIVE/RIDE with others
- OTHER

**How will your student depart school in the afternoon?**

Please check how your student will depart school in the afternoon.

- BUS to home
- BUS to alternate destination
- WALK
- PICKED UP by parent/guardian
- DRIVE/RIDE with others
- OTHER

**All students residing within a School District of Belleville bus zone (beyond 1/2 mile of school) will be assigned a bus route that they may use throughout the year based on their home address. If alternate locations are needed please complete the following:**

Alternate Location #1:

Location Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Location Address: \_\_\_\_\_

Days transportation needed:  M     T     W     R     F     ALL     VARIES

Time of day transportation needed:  AM     PM

Alternate Location #2:

Location Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Location Address: \_\_\_\_\_

Days transportation needed:  M     T     W     R     F     ALL     VARIES

Time of day transportation needed:  AM     PM

Additional information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_