



Prairie Spirit School Division RURAL BUS TRANSPORTATION REQUEST

Please return completed form to Prairie Spirit School Division
Fax: 374-2862 or e-mail: carrielynn.weigel@spiritsd.ca
Allow 7 days processing time for bus requests

School Requested: _____ Bus Request Start Date: _____ 20____

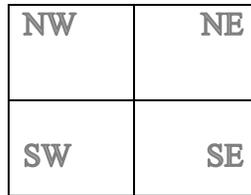
Parent/Guardian Primary Cell or Home Phone Number: _____

STUDENT INFORMATION:

If Applicable:

Name: _____ Gender: _____ Grade: _____ Allergies/Special Needs: _____
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Legal Land Description (Rural): _____ - _____ - _____ W of _____
(section number, include NE, NW, SE or SW) (township) (range) (meridian)



Rural: Please draw your driveway and home location on the diagram of a 1 square mile section of land (divided into quarter sections) to show where the school bus will access your property. Please label applicable street, road, or highway names or numbers bordering the section below. Yard service not provided for driveways under 200 m in length and not necessarily for driveways over 200 m.

Street Address (Urban): _____
(Include street address, and town or subdivision as applicable.)

Parents/Legal Guardian Name(s) & Relationship to student: _____

Additional Parent/Guardian Cell Nos.: _____ Work Phone Nos.: _____

Home Mailing Address: _____

Alternate Emergency Contact Name and Relationship to Student: _____

Alternate Emergency Contact Phone: _____

Notes: _____

Parent/Legal Guardian Signature _____

Date _____