



Early Childhood Transportation Application Form

Parents of students who require bus transportation for the **2016-2017** school year are to complete the following registration form and submit it to the school.

School		Program <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> FULL DAY	
		<input type="checkbox"/> Kindergarten <input type="checkbox"/> Headstart <input type="checkbox"/> KEP <input type="checkbox"/> PEP	
Student Information			
Last name:		First name:	
Home phone:	Birthdate: (M/D/Y)	<input type="checkbox"/> Female <input type="checkbox"/> Male	
Street or 911 address:			
Mailing address:			
Parent/Guardian Information			
Parent/guardian name:		Work #	Cell #
<i>If pick-up/drop-off location is different than home, please fill in below:</i>			
Caregiver name:		Phone Number:	
Caregiver address:		Pick-up/drop-off <input type="checkbox"/> A.M <input type="checkbox"/> P.M	
Emergency Contact Name:		Contact number: (other than home number)	

Office Use:

Transportation Fees:	Paid by <input type="checkbox"/> cheque <input type="checkbox"/> cash	Initials: _____
Amount Paid: _____	Date: _____ (m/d/y)	Receipt # _____

Transportation Department Use:

Comments/Concerns:	
Bus Driver:	Bus Route:

The information requested is being collected pursuant to the School Act, Section 23, and the FOIP Act, Sections 33(c), 39(1) (b) and 40 (1) (c). Video cameras may be used on school buses for safety and/or student management purposes only. Information acquired through this form is kept secure and access is restricted. For further information, please contact your school principal or Dave Johnson, FOIPP Coordinator at 780-939-4341 or djohnson@sturgeon.ab.ca

Manager, Transportation Services

Date