

2024-2025 Jarrell ISD School Bus Rider Information
TRANSPORTATION REQUIRES 3 DAYS AFTER REGISTRATION HAS COMPLETED

(Please print all entries)

*Only Guardian/Grandparent Addresses are acceptable. A Grandparent's home that is within the bus zone for the student's campus of attendance will be accepted. Inter-District/Intra-District Transfer students **will not** be transported. Students may only ride to and from a single address, whether it is their home, grandparent's home, or childcare facility.

Student's Name (Last, First)	Grade	Student's ID Number
Student's Physical Address		

Decline Transportation Services: _____

Parent Signature <u>DECLINING SERVICE</u>	Date
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*(If Declined, **DO NOT** fill out the remainder of this form)*

Parent/Guardian: _____

Cell Phone: _____ Home Phone: _____ Work Phone: _____

Parent/Guardian: _____

Cell Phone: _____ Home Phone: _____ Work Phone: _____

Emergency Contact: _____ Phone #: _____

Pre-K through 1st Grade Students Only (Skip to Signature if Not Applicable)

The Jarrell ISD Transportation Policy requires that ALL students in Pre-K through 1st grade be met at their bus stop each afternoon. Only the Parent/Guardian or the listed adults will be authorized to receive your student. Any individual picking up a student at the bus stop must have a government issued picture ID with them and present it to the bus driver if requested before student will be released. I also understand that if no one is present at the bus stop at the scheduled time, the student will be returned to the school. It is then the responsibility of the parent/guardian to pick the student up from the school. I also understand, if an authorized adult continues to fail to be at the bus stop to meet my child, my child becomes at risk of being suspended from the bus.

Any 2nd grader or above who is authorized to escort the above student must be listed below.
(No ID is required if the student rides the same bus).

***If any changes to this authorization (add OR delete) occur, a new form must be completed and provided to the Elementary office; however, changes will not become effective until the information is received by Transportation Services.

Please print full name as shown on ID card (No Mr./Mrs.)

NAME	RELATIONSHIP	GRADE (if applicable)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Parent/Guardian Signature <u>FOR</u> Transportation Services	Date
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