

## Request for Transportation Under Act 372

(Please complete a separate form for each child requiring bus transportation next school year)

1. Child's name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade entering \_\_\_\_\_

2. Address (if rural address, indicate specific location):

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

3. Public school district in which child resides: \_\_\_\_\_

4. Name of nonpublic school attending: Holy Family School, 17 N. Convent Ave., Nazareth, PA 18064.

5. The above named child lives approximately \_\_\_\_\_ miles from the nonpublic school he/she will be attending.

6. If your child received public school district transportation last year, please indicate:

Bus number: \_\_\_\_\_ District: \_\_\_\_\_

**TRANSPORTATION REQUIRED:** \_\_\_\_\_ **AM** \_\_\_\_\_ **PM** \_\_\_\_\_ **BOTH**

Mother Information

Father Information

Name: (please print): \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Parent(s) signature: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency contact names and phone numbers (other than parents):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_