

VILS/GRAF/NETZ SCHOOL BUS TRANSPORTATION REQUEST

COMM: 09645-9179229 or 09662-832864

DSN: 472-9229 or 476-2864

Sponsor's Information:

Name: _____
First Middle Last Jr/Sr/Generation

DEROS: Month _____ Year _____ Branch: _____

Title/Pay Grade: _____ Home Phone: _____

Duty Phone: _____ Cell Phone: _____

Home Email: _____

Work Email: _____

For Official Use Only: SY20/21

_____ New Student

_____ Returning Student Bus

Assignment _____

Stop Assignment _____

Notes _____

Unit/Organization Name: _____

Unit Location: _____

Personal Mailing Address:

CMR _____ Box _____

APO, AE _____

Zipcode

Home Address:

Pickup/Drop-Off Request:
(For Example: Home, SAS, CDC, FCC Provider)

AM: _____

PM: _____

Requested Start Date:

Emergency Contact:

Name: _____

Phone: _____

Student's Information: **If you have more than 3 students please write on the back and check here _____*

(1) Name: _____ Birthdate: _____
First Middle Last Jr/Sr/Generation Month/Day/Year

Gender: <small>Select One</small> Male Female	School: <small>Select One</small> Grafenwoehr ES Netzaberg ES Vilseck ES Netzaberg MS Vilseck HS	Grade: _____
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(2) Name: _____ Birthdate: _____
First Middle Last Jr/Sr/Generation Month/Day/Year

Gender: <small>Select One</small> Male Female	School: <small>Select One</small> Grafenwoehr ES Netzaberg ES Vilseck ES Netzaberg MS Vilseck HS	Grade: _____
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(3) Name: _____ Birthdate: _____
First Middle Last Jr/Sr/Generation Month/Day/Year

Gender: <small>Select One</small> Male Female	School: <small>Select One</small> Grafenwoehr ES Netzaberg ES Vilseck ES Netzaberg MS Vilseck HS	Grade: _____
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Spouse's Information:

Name: _____
Title First Middle Last Jr/Sr/Generation

Phone: _____ Email: _____

Statement of Understanding:

I have received and read the school bus student standards of behavior. I agree to discuss these rules with my child(ren) that ride the school bus. I understand that any misconduct by my child(ren) on the school bus could result in the suspension of my child(ren)'s bus riding privileges. I will promptly report any change of address, phone number, or email to the Student Transportation Office, especially if bus service is no longer needed. I have read and understand the Vilseck Student Transportation Handbook SY20-21, specifically the included "space available" guidelines. I understand that if I choose to live outside of the school bus zone or choose "exception to feeder" at the elementary school level, my child(ren) become space available riders and transportation is not guaranteed.

Date _____

Parent or Legal Guardian Signature