

ELIGIBLE STUDENT REQUEST FOR TRANSPORTATION

PLEASE ALLOW A MINIMUM	OF 5 DAYS TO PROCESS AND	ONLY O	NE STUDENT PER	R FORM.	
Please consider this my reque school year. Start Date:	•		•		
Student's Name	Street Address/Postal Co	de	Scho	ol	Grade
Request for Busing Service: Please check the appropriate box of A.M. Route □ Noon for If your child's pick-up/drop-off including name, address and process.	rom Kindergarten	ove add			M. Route ete details
Transportation Route	First and Last Name	Str	eet Address/Posta	al Code	Phone Number
A.M. Route					
Noon from Kindergarten					
Noon to Kindergarten					
P.M. Route					
To notify the Pembina Trails Soplease call Dispatch at 204.489 For enhanced safety, school be Relevant Student Information Please check if your child has a Life-threatening allergy to: Seizure disorder Mobilit Other:	e.2597. uses are under audio/video selections: any conditions that could requesty Diabetes Communications	urveillan uire inte	rvention during tra	ansportat	
☐ I have read the Pembina Tra	n to, from and at your neighb nils School Division's guideling form and acknowledge their	es as sho	own on the revers		
Parent/Guardian(s) Signature			Date		

Eligible students are:

- those students who are disabled.
- those students who reside over 1.6 km walking distance from their catchment area school and are in grades K to 6.
- other students residing in rural areas over 1.6 km from a transit route.

Eligible students are entitled to free transportation service to an address that is also eligible for transportation:

- within 500m walking distance from their home.
- from one address.
- to one address.

Non-eligible students (Seat Sale) are:

- attending a non-eligible daycare.
- attending an out-of-catchment school.
- any other student(s) not considered eligible.

Note: A non-eligible student may request a Seat Sale Application.