South Western School District  
50 Spring Garden Street  
Hanover, PA 17331  
633-4776

REQUEST FOR TRANSPORTATION

Every school year you must fill out a new form for each child. If you have any questions, call Chuck Baumgardner at 633-4776.

School ______________________ DOB _____ M _____ F _____ Grade ______

Student Last Name ___________________ First Name ___________________ MI _____

Names of Parent or Guardian with Whom Pupil Resides: ____________________________ Phone Number __________________________

Does guardian receive any monies as a foster parent? YES – NO (circle one, do not enter amount)

*IF STUDENT ALREADY RESIDES* in South Western School District, please list complete street address:

__________________________________________________________________________

City ___________________ Zip Code ________

Township _____ Closest intersection or cross street for reference __________________________

If student is NOT living within South Western School District at this moment, please list current address:

__________________________________________________________________________

City ___________________ Zip Code ________

What is expected date of move into the district ____________________ Current phone# __________________

Names of other siblings riding SW buses ____________________________________________

If your child will be transported to or from a sitter address, please fill in the information below:

Sitter Name ______________________ Sitter Phone# __________________

Sitter Address ______________________

IMPORTANT: If no area below is checked, NO transportation will be provided.

I desire transportation for my child as follows:

AM _____ from the school board approved bus stop closest: to my home or to the sitter-- (circle one)

PM _____ to the school board approved bus stop closest: to my home or to the sitter-- (circle one)

I am a resident of South Western School District and request transportation to the above named non-public school. I understand that non-residents of South Western School District are not transported by South Western buses.

Parent Signature ______________________ Date ______________________

**For Office Use Only:**

AM Bus # ______ Bus Stop ____________ Shuttle Bus # ____________

PM Bus # ______ Bus Stop ____________ Shuttle Bus # ____________