

Upper Adams School District
2026-2027 Non-Public Student
Transportation Request Form

Check one:

I request Upper Adams School District to transport my child to the below named charter or non-public school.

I do not wish to request transportation from the Upper Adams School District at this time.
Please complete Name, Address and Birthdate, school & grade FORM is still required

Student Name _____ **Birth date** _____

Parent(s) or Guardian(s) Name(s)

Address (include mailing address)

City _____ **State** _____ **Zip** _____

Home Phone # _____ **Mother's Work Phone #** _____ **Father's Work #** _____
Cell Phone # _____ **e-mail** _____

Charter/Non-Public School Attending _____ **Grade** _____

Concise description of location student is to be picked up in the morning, must be same stop Monday through Friday (include road # and name):

Concise description of location student is to be dropped off in the afternoon, must be same stop Monday through Friday (include road # and name):

In the event of an emergency, such as an early dismissal due to inclement weather, please list an alternate person to pick up your child should we be unable to deliver them to the above stop and we are unable to reach a parent or guardian.

Alternate Name _____ **Phone #** _____

Address (include road # and name)

City _____ **State** _____ **Zip** _____

Does the student have a medical condition that the school district and/or bus driver should know about? _____ Yes _____ No _____

If Yes, please explain. _____

Signature of Parent _____ **Date** _____