



JASON GAY
Transportation Supervisor

REQUEST FOR TRANSPORTATION UNDER ACT 372 NON-PUBLIC SCHOOL STUDENTS

COMPLETE A SEPARATE FORM FOR EACH CHILD

A NEW FORM MUST BE SUBMITTED TO WESTERN WAYNE SCHOOL DISTRICT EVERY SCHOOL YEAR

1. Name of student: _____ Date of Birth: _____

2. Address: _____ Grade Entering _____

3. Name of Non-Public School attending: _____

a. Phone number of school to verify: _____

EFFECTIVE ENTRANCE DATE: _____

I require Transportation at this time: ____AM ____PM ____Both

Parent/Guardian 1 Information

Name (Please Print): _____

Cell Phone: _____

Email: _____

PARENT/GUARDIAN) SIGNATURE: _____ DATE: _____

Parent/Guardian 2 Information

Name (Please Print): _____

Cell Phone: _____

Email: _____

PARENT/GUARDIAN) SIGNATURE: _____ DATE: _____

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