



SCRANTON SCHOOL DISTRICT NON-PUBLIC TRANSPORTATION REQUEST 2020-2021 SCHOOL YEAR

SCHOOL: ST. CLARE/ST. PAUL

1. NAME OF STUDENT: _____
(PLEASE PRINT CLEARLY)

2. ADDRESS OF STUDENT: _____
(PLEASE PRINT CLEARLY)

IF RURAL, SPECIFY EXACT LOCATION: _____
(PLEASE PRINT CLEARLY)

3. GRADE STUDENT WILL ENTER IN 2020: _____

4. NAME OF PUBLIC SCHOOL DISTRICT WHERE STUDENT RESIDES:

5. THE ABOVE NAMED STUDENT LIVES APPROXIMATELY _____ MILES FROM THE PAROCHIAL SCHOOL TO BE ATTENDED IN 2020.

6. BUS STOP REQUESTED: _____

PARENT /GUARDIAN NAME: _____

PARENT/GUARDIAN PHONE#: _____

PARENT/GUARDIAN
SIGNATURE

SCHOOL PRINCIPAL
SIGNATURE

____ APPROVED

____ DENIED

*****PLEASE NOTE*****

STUDENTS CURRENTLY BEING TRANSPORTED BY THE SCRANTON SCHOOL DISTRICT MUST RE-APPLY FOR THE 2020-2021 SCHOOL YEAR.

A SEPARATE FORM MUST BE COMPLETED FOR EACH STUDENT REQUESTING TRANSPORTATION.

ALL APPLICANTS MUST RESIDE WITHIN TH BOUNDARIES OF THE SCRANTON SCHOOL DISTRICT.