## **EAST HADDAM PUBLIC SCHOOLS – TRANSPORTATION FORM**

			Date Completed: / /
CHECK ONE: [ ] New Student	[ ]	Change Request- curr	ently enrolled
SCHOOL: [ ]Grade K-3 Elementary	[ ]Grade 4-5 Middle	[ ]Grade 6-8 Middle	[ ]Grade 9-12 High School
Student's Last Name:	First Name:		Grade:
		Town:	Is this a new address? [ ] yes [ ] no
Please name all siblings/grades: (complete separ	rate forms for each student)		
CONTACT INFORMATION (Living in address listed	d above):		
Parent/Guardian Living with Student #1: Last Nar	me:	First Name:	Best Number:
Parent/Guardian Living with Student #2: Last Nar	me:	First Name:	Best Number:
JOINT CUSTODY:			
Parent/Guardian, Joint Custody #1: Last Name: _	First N	lame:	Best Number:
Street Address: Town:			
*For transportation, joint custody homes must reside in the East Haddam/Moodus District (NO P.O. Boxes)			
DAYS NEEDING TRANSPORTION TO THIS HOME: (Circle all that apply)			
	• • • • •	RSDAY   FRIE	DAY
AM PM  AM PM	AM PM   AM	PM   AM	PM
DAYCARE: (check one) [ ] Kindercare [ ] Little Noises [ ] Little Village [ ] Private Daycare (complete information below)  **All daycare transportation is provided on a five day/full week schedule only***  (check one) [ ] AM Pick up only [ ] PM drop off only [ ] Both Pick-up and Drop Off			
Private Daycare Primary Contact: Last Name:	First N	lame:	Best Number:
Street Address:		own:	
*For transportation, private daycare homes must reside in the East Haddam/Moodus District (NO P.O. Boxes)			

BUS # Residence: am

pm

COPIES:

1- STUDENT RECORD 2-DATTCO 3-EVERBRIDGE

BUS # Other: am

pm

rev. 7/17