GREATER NANTICOKE AREA SCHOOL DISTRICT

Non-Public Transportation Request & Bus Emergency Information 2023-2024 School Year

PLEASE PRINT ALL INFORMATION BELOW:

Grade

Student Name _____

_____ (2023-2024 School Year)

Address				
City, State, Zip				_
Phone (Home)		Phone (Cell)		
Email _				
School			-	
Bus	Al	M Bus #	PM Bus #	
Bus Stop _				
Medical Conditions		NA		
Medication Being taken _	N/.	A		
NAME AND D			RENT/GUARDIAN WHO SHO FOF A BUS EMERGENCY	OULD BE
Emergency Phone		Home	Cell	
Alt Emergency Phone #		Home	Cell	
Name				
Relationship to Student				
Parent/Guardian	Signature			
Parent/Guardian Name (Please print)				