



Tumwater School District

Support Services
2020 80th Ave. SW
Tumwater, WA 98512
www.tumwater.k12.wa.us

Jeff Gregory
Transportation Supervisor
Heather Cooley
Route Coordinator

Request for Transportation Date: _____

The following information must be completed, **in full**, and turned into your school in order for transportation to be provided. **This must be done every year.**

SCHOOL: _____ Grade: _____

STUDENT NAME: _____

ADDRESS: _____

NEAREST CROSS STREET: _____

PARENT(S) NAME: _____

HOME PHONE: _____ CELL: _____ WORK: _____

If student will be getting **ON** the bus from a daycare/sitter location, please complete the following:

DAYCARE/SITTER'S NAME: _____

ADDRESS: _____

NEAREST CROSS STREET: _____

PHONE(S): _____

If student will be getting **OFF** the bus to go to a daycare/sitter location, please complete the following:

DAYCARE/SITTER'S NAME: _____

ADDRESS: _____

NEAREST CROSS STREET: _____

PHONE(S): _____

PARENTS/GUARDIANS PLEASE NOTE

It may take **up to five days** to assign or create a bus stop. In order to provide your child with school transportation, it is necessary to have accurate and current information. If **changes** occur in **any** of the above information (i.e.: student moves, changes daycare/sitter), please contact your school.

"Continuous Student Learning in a Caring, Engaging Environment"

Transportation Office Use Only: AM Time _____ PM Time _____.

Driver Contacted Family: Date _____ Time _____ Person Contacted _____