

ID# \_\_\_\_\_

# Private School Transportation Form

**Nordonia Hills Transportation Dept.**  
7943 South Bedford Road  
Macedonia, OH 44056

Grade: K 1 2 3 4 5 6 7 8 9 10 11 12 (circle one)

**ELIGIBLE TO K-12 STUDENTS WHOSE HOME ADDRESS IS OVER ONE MILE OR MORE FROM BUILDING OF ATTENDANCE**

**\*\*PLEASE ALLOW TWO WEEKS FOR PROCESSING\*\***

Transportation 330-468-4710 Fax 330-908-1789

## BUS STOP REQUEST FORM

Student Name: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Daytime Telephone: \_\_\_\_\_

Effective Date: \_\_\_\_\_ Cell Phone (optional): \_\_\_\_\_

Please check the appropriate responses regarding transportation for your child.

### SCHOOL MY CHILD WILL BE ATTENDING

- \_\_\_\_\_ Aurora Valley Christian Academy
- \_\_\_\_\_ Cuyahoga Valley Christian Academy
- \_\_\_\_\_ Lawrence Upper School
- \_\_\_\_\_ Trinity High School
- \_\_\_\_\_ Walsh Jesuit High School
- \_\_\_\_\_ St. Barnabas

### TO SCHOOL

\_\_\_\_\_ I will drive my child to school. \_\_\_\_\_ Requesting pick-up by the bus.

My St. Barnabas child will be bused from the following daycare  KinderCare  NF Presbyterian  Stepping Stone  
Or caregiver (List name of person, address, telephone number) \_\_\_\_\_

### FROM SCHOOL

\_\_\_\_\_ I will pick up my child from school. \_\_\_\_\_ Requesting drop off by the bus.

My St. Barnabas child will be bused from the following daycare  KinderCare  NF Presbyterian  Stepping Stone  
Or caregiver (List name of person, address, telephone number) \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### OFFICE USE ONLY

Approval

EFFECTIVE DATE: \_\_\_\_\_

10/27/2017