



REQUEST FOR TRANSPORTATION

Don Bosco Charter High School
548 Garfield Kansas City, Missouri 64124
(816) 691-2930 Fax: (816) 691-2927

Contact Person: Ms. Robin Boston, Transportation Coordinator

Date

Student Name: _____ Phone: _____

_____, MO _____
Address City Zip Code

Parent daytime phone: _____

Emergency Contact

Name Address Phone

Name Address Phone

Please read carefully and initial after each.

I understand that transportation for my child is a courtesy that can be revoked for the following reasons:

Smoking Weapons Fighting

Abusive & Negative Possession of Alcohol or Drugs

Throwing object on the bus/or out of the windows

Standing or moving in the aisle while the bus is moving

Disrespect toward driver or students

Parent Signature

Date

Student Signature

Date