

**Acton Boxborough Regional School
Kindergarten Bus Transportation**

16 Charter Road
Acton, MA 01720-2995
(978) 264-3328

To: The Parents of Kindergarten Students
From: Transportation Manager
Re: Bus Transportation Arrangements for Kindergarten

PLEASE FILL OUT AND RETURN THIS FORM

If you are unsure of daycare arrangements at this time, please call the Bus Transportation Office 978.264.3328 for further instructions.

Child's Name _____ **Home or Cell Phone #** _____

Home Address _____ **SCHOOL** _____

CHECK ONE BOX ONLY

Check the following box that pertains to your child's schedule.

Child **will not** require bus transportation **to or from** school and will not be assigned to a bus route:

YOU MUST FILL IN EVERY LINE ON THE SECTION BELOW to insure proper arrangements for your child. Any days not filled in will be defaulted to Parent Transports.

Child **will need** arrangements for school bus transportation to and/or from school as follows:

| Where should child be picked up to go to school? | | Where should child be dropped off after school? | |
|---|----|--|--|
| Mon | | | |
| Tue | | | |
| Wed | AM | SESSION | |
| Thu* | | | |
| Fri | | | |

Thursday: Kindergarten students will be dismissed with the elementary students and arrive **an hour later than usual.*

| Where should child be picked up to go to school? | | Where should child be dropped off after school? | |
|---|---------|--|--|
| Mon | | | |
| Tue | | | |
| Wed | ALL DAY | SESSION | |
| Thu* | | | |
| Fri | | | |

**Thursday: Kindergarten students will be dismissed with the elementary students.*

| | |
|---------------------------|----------------------------------|
| Parent's Signature: _____ | Today's Date: ____ / ____ / ____ |
|---------------------------|----------------------------------|