



## TRANSPORTATION REQUEST FORM (Grades 1-12)

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

Grade: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_

School: \_\_\_\_\_

***\*This form must be returned to Nelson's Bus Service. Please note that all requests require a minimum of five days for processing.***

***Transportation will be provided only if ALL of the following conditions are met:***

- Students are residents of the Monona Grove School District (Non-Residents **must** apply for transportation, in writing at the District Office)
- Students attend Monona Grove Public Schools
- Parents/Guardians may designate only one pick-up location and one drop-off location for their child.
- Students will be picked up or dropped off on an established route at an established stop.
- Bus stop is located within the boundaries of the Monona Grove School District.
- Home address and requested pick-up/drop-off location is located outside of the designated "walk" area.
- Bus routes and stops will not be modified to accommodate personal preferences
- No additional costs are incurred by the MGSD as a result the transportation to/from childcare provider.

### **TRANSPORTATION TO SCHOOL FROM HOME OR DAY CARE PROVIDER *Check Only One Box***

- I will provide transportation for my child to school. (Students who reside in the designated walk area must check this box)
- I request school bus transport for my child to school from the established bus stop closest to our home address.
- I request school bus transport for my child to school from the established bus stop closest to designated **childcare provider**.  
***PER BOARD POLICY, 751.1(7)-DETERMINES ACCEPTABLE TRANSPORTATION TO DAYCARE FACILITIES.***

*Pick up and drop off location may be different.*

### **TRANSPORTATION FROM SCHOOL TO HOME OR DAYCARE PROVIDER *Check Only One Box***

- I will provide transportation for my child from school. (Students who reside in the designated walk area must check this box)
- I request school bus transport for my child from school to the established bus stop closest to our home address.
- I request school bus transport for my child from school to the established bus stop closest to designated **childcare provider**.  
***PER BOARD POLICY, 751.1(7)-DETERMINES ACCEPTABLE TRANSPORTATION TO DAYCARE FACILITIES.***

***Parent(s)/Guardian(s) may request a pick-up or drop-off bus stop at/near a childcare provider by completing the information below.***  
**CHILDCARE PROVIDER INFORMATION**

#### **LIST ONE PICK-UP BUS STOP ONLY ---- TRANSPORTATION TO SCHOOL**

Provider: \_\_\_\_\_ Contact: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 \_\_\_\_\_ Date Pick-up services is requested to begin: \_\_\_\_\_

#### **LIST ONE DROP-OFF BUS STOP ONLY ---- TRANSPORTATION FROM SCHOOL**

Provider: \_\_\_\_\_ Contact: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 \_\_\_\_\_ Date Drop-off service is requested to begin: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date of Request: \_\_\_\_\_

**Submit Form to:**  
**Nelson Bus Service, Inc.**  
**2862 Siggelkow Road McFarland, WI 53558**  
**Email: MononaGrove@NelsonsBusService.com**  
**Fax: (608) 205-9044**