

Grades PS-8 Individual Student Transportation Information

(Please complete and send to school on Monday, August 26th with your child.)

Student Name: _____ Grade _____

Please check one: Public School Bus/Van _____ Walker _____ LaCare _____
 Car Rider _____ Lot 2 _____ Lot 3 _____

If you checked Public School Bus/Van, complete the following:

*Name of Public School District: _____

*Bus Number(s) that you use to come to La Salle:

1st bus no.

Transfer Bus No.

*Bus Number(s) that you use to leave La Salle:

1st bus no.

Transfer Bus No.

Please make a major effort to make your children's first day transportation plan the same plan that they will be following throughout the year.

Please be aware of the following special circumstances concerning my child's transportation arrangements:
