

BOWEN BUS SERVICE

2019-20

****Shuttle Bus Transportation Request for Private School Students****

Any student who will need to ride the shuttle bus is asked to complete and return this form. This form is only for students needing a ride to an afterschool activity. Please list the activity and the date the activity will end. Busing will not be provided without this form.

Forms are due no later than August 1, 2019 to be eligible on the first day of school. Student will be eligible to ride after you are contacted (either by phone or postcard) with bus information.

Return to: Bowen Bus Service, Inc.
Mail: P.O. Box 43 McNaughton, WI 54543
Email: school@bowensbusinc.com
Fax: 715-362-3997

| | | | | | |
|--------------|-----------|-------|-------|--------|-------|
| Student Name | (1) _____ | Grade | _____ | School | _____ |
| | (2) _____ | Grade | _____ | School | _____ |
| | (3) _____ | Grade | _____ | School | _____ |
| | (4) _____ | Grade | _____ | School | _____ |
| | (5) _____ | Grade | _____ | School | _____ |

Start Date _____

NEED PM SHUTTLE to JWMS ONLY _____

After School Activity _____ End Date _____

After School Activity _____ End Date _____

After School Activity _____ End Date _____

After School Activity _____ End Date _____

OTHER INFO/COMMENTS _____

Please list phone numbers in the order you would like them called if we need to contact you.

1st Phone: _____ **2nd Phone:** _____ **3rd Phone:** _____

Parents Name _____

Parents Signature _____ **Date** _____

Parent is responsible for transporting student until contacted by the bus company with busing information. This could take up to 2 weeks.

Transportation Office Use Only

Approved _____ Denied _____ Reason (if denied) _____

Shuttle AM: _____ PM: _____

Added to route sheets ___ Notified Driver ___ Informed Parent ___ Informed School ___ Date Notified _____

www.bowensbusinc.com Location: 1940 River St, Rhinelander WI 54501 Phone: 715-362-3996 Fax: 715-362-3997