



Office Use Only: Student Id #: _____

Start Date: _____

New Request Change in Original Request

Preschool Transportation Form 2022-2023

Return form to the IGH Early Learning Center

3203 68th St E, Inver Grove Heights 55076 / Fax: 651-306-7521 / Email: Preschool@isd199.org

Transportation is available on a limited basis for 4-year-old preschool students. Requests will be prioritized based on need. Bus transportation may be available for students whose home or daycare address falls within the school boundary area. **It is also important to note that preschool children may be transported with K-5 students.**

Student Information

| | | |
|-------------|-----------------|------------|
| First Name: | Middle Initial: | Last Name: |
|-------------|-----------------|------------|

Parent Information

| | | |
|---------------|-----------------|----------------|
| First Name: | Middle Initial: | Last Name: |
| Main Phone #: | Work Phone #: | Email Address: |

Transportation Information - Please indicate what SCHOOL and CLASS your child is enrolled in below.

| School | |
|--------------------------|------------------------|
| <input type="checkbox"/> | Hilltop Elementary |
| <input type="checkbox"/> | Pine Bend Elementary |
| <input type="checkbox"/> | Salem Hills Elementary |

| Class | | |
|--------------------------|-------------------------|--------------------|
| <input type="checkbox"/> | Monday - Friday AM | 7:50 AM - 10:30 AM |
| <input type="checkbox"/> | Monday - Thursday PM | 11:45 AM - 2:30 PM |
| <input type="checkbox"/> | Monday - Friday ALL DAY | 7:50 AM - 2:30 PM |

Please circle your transportation choices below.

No Transportation

To School: M T W Th F

From School: M T W Th F

Home Transportation - (from your home address)

To School: M T W Th F

From School: M T W Th F

Daycare Transportation

To School: M T W Th F

From School: M T W Th F

Daycare Provider Name: _____

Daycare Provider Phone #: _____

Daycare Provider Address: _____

(Street Address)

(City, State, Zip Code)

Parent Acknowledgement

- I understand that before school, it is my responsibility to make sure my child is safely escorted to the bus stop and someone remains with them until the bus arrives.
- I understand it is my responsibility that after school someone is waiting at the bus stop to get my child off of the bus.

| | |
|----------------------------|-------|
| Parent/Guardian Signature: | Date: |
|----------------------------|-------|

It will take approximately two weeks for any change to go into effect. The Early Learning Office will contact you once the transportation department has completed the request.