



PRE-KINDERGARTEN & KINDERGARTEN TRANSPORTATION FORM

We ask that ALL Pre-Kindergarten & Kindergarten parents please complete this form whether your son/daughter is riding the bus or not.

School Year: _____ AM PM Mon/Wed Tue/Thu Montessori

Student's LEGAL Name: _____ School: _____
First Name Last Name

Parent's Name: _____

(Parent's/Home) Street or Legal Land: _____
(not babysitter's address)

(Parent's/Home) Mailing Address: _____ Postal Code: _____

Home Phone No: _____ Cell Phone No: _____ Work Phone No: _____

PLEASE CHECK only ONE OF THE boxes BELOW.

*Pre-Kindergarten

- My child is in a designated Pre-Kindergarten program and I will transport my child and I will seek reimbursement at the end of the school year
I am a County resident (\$10.00/day) & child is designated (coded according to Alberta Education criteria)
I am a City resident (\$3.00/day) & child is designated (coded according to Alberta Education criteria)

*Kindergarten

- I am a resident of the City of Grande Prairie and my child will use First Student and will be bussed if the distance is over 1.7 km to the designated school.
I am a resident of the City of Grande Prairie and I will purchase a First Student bus pass for my child because the distance under 1.7 km to the designated school. The pass is available for purchase if space is available on the bus.
I am a resident of the City of Grande Prairie and my daughter/son needs to cross 68 Ave or 108 St (Wapiti Road) and needs to be transported by First Student for safety reasons (no distance requirement).
I am a resident of the County of Grande Prairie and my child attends the full day program at Ecole St. Gerard, Holy Cross, St. Clement, Mother Teresa or St. Kateri and St. Catherine will be bussed by First Student.
I am a resident of the County of Grande Prairie and my child attends a half day Kindergarten program in the City of Grande Prairie and First Student is unable to transport my child at noon. I will seek reimbursement amount at year-end.
One-way parent provided transportation to the County (\$5.00/day)

None of the above.

(Date)

(Parent/Guardian)

Office use only

Table with 4 rows and 4 columns: Distance categories, Total # of school days, Total # of absences, Total amount of reimbursement, Date, Bus Pass #