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CARVER PUBLIC SCHOOLS

3 Carver Square Blvd., Carver, MA 02330

Transportation Request Form

2020-2021 School Year

Please complete this form for each child who will need transportation for the 2020-2021 school year and submit it to the Director of Transportation via mail or email by **Monday, August 17, 2020**.

Please note: Students can only be assigned one bus route in the morning and one bus route in the afternoon.

STUDENT INFORMATION

Name: _____
(First) (Last)

Grade Level for the 2020-2021 School Year: PreK K 1 2 3 4 5
 6 7 8 9 10 11 12 POST

Does this student require bus transportation for the 2020-2021 school year? YES NO

If you feel as though your student may need transportation at any time throughout the year, please check yes in order to reserve a seat. If yes, please continue to the next questions. If no, you can submit the form without any additional information needed.

MORNING TRANSPORTATION

Any boxes checked in this section, will reserve a seat for your student for the entire 2020-2021 school year.

I am requesting **morning** transportation on the following days: **Monday** **Tuesday** **Thursday** **Friday** **NONE**
GROUP A GROUP A GROUP B GROUP B

Morning

Pick Up Address: _____

* **Please note:** Only one pick up location is allowed. The address must be the same each day.

AFTERNOON TRANSPORTATION

Any boxes checked in this section, will reserve a seat for your student for the entire 2020-2021 school year.

I am requesting **afternoon** transportation on the following days: **Monday** **Tuesday** **Thursday** **Friday** **NONE**
GROUP A GROUP A GROUP B GROUP B

Afternoon

Drop Off Address: _____

* **Please note:** Only one drop off location is allowed. The address must be the same each day.

Please be aware, I am submitting a hardship request and my needs/days may change.

Office use only

Date received: _____ AM Estimate _____ PM Estimate _____ Route # _____