

Portage Public Schools

THE FUTURE LEARNS HERE

Transportation Department
8111 S. Westnedge Avenue
Portage, Michigan 49002

(269) 323-5151 (voice)
(269) 323-5193 (fax)

Transportation@PortagePS.org (email)

TRANSPORTATION REQUEST

In order for the Portage Public Schools to provide a safe and orderly transportation system, all students are required to register for bus service. Students not registered with transportation will not be assigned to a bus. Parents/guardians are encouraged to identify one (1) pick up and one (1) drop off location for the school year. The bus stop may or may not be located at the home address. However, students will be assigned within the prescribed walking distance. Any changes must be made in writing. Thank you in advance for your support and cooperation.

Student Name: _____ Date of Birth: _____ Today's Date: _____

REQUESTED School and Grade Assignment: _____

This transportation request is for the: ☐ Current school year ☐ Next school year

Home Address: _____ Home Phone: _____

City/Zip Code: _____

Student Resides With: Name Relationship Daytime Phone #

1) _____

2) _____

Transportation Needs

PICK UP AT:

☐ Home

☐ Curious Kids: ☐ at PCEC ~or~ ☐ at _____ location

☐ Other Child Care: Name: _____ Phone: _____

Address: _____

☐ Transportation to school is **not** required

DROP OFF AT:

☐ Home

☐ Curious Kids: ☐ at PCEC ~or~ ☐ at _____ location

☐ Other Child Care: Name: _____ Phone: _____

Address: _____

☐ Transportation from school is **not** required

- Please return this form to the person registering your student(s) or the transportation office.

For School Office Use Only

ASSIGNED School and Grade: _____ **SIS** Student Number: _____

Comments or notes: _____

Enrolled/Authorized By: _____ Date: _____

For PPS Transportation Use Only

☐ Entered in VT By/Date: _____ ☐ Driver Notified By/Date: _____ ☐ Parent/Guardian Notified By/Date: _____