

**HOPE ELEMENTARY SCHOOL
Pre-K TRANSPORTATION INFORMATION**

Please complete this information and return to school as soon as possible. If at anytime this information changes, other than a temporary change, we ask that you complete a new form. Forms can be found on our website www.fivetowns.net/hes/ or please ask your child's teacher and a copy will be sent home.

Student Name: _____ AM/PM: _____

Please indicate student's normal mode of transportation from school:

Mon. Arrival	Bus address: _____	Y Bus -----	Rider picked up by:_____
Mon. Departure	Bus address: _____	Y Bus -----	Rider picked up by:_____
Tues. Arrival	Bus address: _____	Y Bus -----	Rider picked up by:_____
Tues. Departure	Bus address: _____	Y Bus -----	Rider picked up by:_____
Wed. Arrival	Bus address: _____	Y Bus -----	Rider picked up by:_____
Wed. Departure	Bus address: _____	Y Bus -----	Rider picked up by:_____
Thurs. Arrival	Bus address: _____	Y Bus -----	Rider picked up by:_____
Thurs. Departure	Bus address: _____	Y Bus -----	Rider picked up by:_____

At any time there is a change from what is filled in on this sheet, we require a written note by a parent/guardian. or email hesoffice@fivetowns.net.

Parent Signature

Date