

## Student Transportation Release

Entire School Year			
Temporary			
Satellite Program:		AM	PM
I am requesting that my child,		, be	allowed to drive from
	chool) to	(satellite program) for the	
STUDENTS: I understand that I am only all any satellite program. I will not transport	any other student(s) to or from school o	or satellite lo	
Reason for request:			
This request, if granted, is for the time listed at the program hosting school and/or the home Corporation Student Conduct Rights, Respon Make and model of vehicle that will be driven	school, if students fail to comply with the E sibilities, Discipline Policy and Student Ru	vansville Va les.	nderburgh School
Student Signature	Student Name, Printed		Date
Parent/Guardian Signature	Parent/Guardian Name, Printe	d	Date
HOME SCHOOL Administrator:	Fax Number: _		
Approved by:	Date:		
Not Approved:	Date:		
EVSC SATELLITE PROGRAM SCHOOL			
Approved:	Date:		
Not Approved:	Date:		
Student Driver Permit Number:	Issue Date:	Issue Date:	