



**City of Cape Coral Charter School Authority  
Transportation Request Form 2011-12**

Our school system offers **limited bus service** for students who live within a 2-5 mile radius of the school. Routes, pick-up and drop-off times and locations will be developed prior to the start of school. Parents will receive notification of their student's bus assignment when it becomes available.

**COMPLETING THIS FORM DOES NOT GUARANTEE THAT  
YOUR CHILD(REN) WILL RECEIVE TRANSPORTATION.**

I am requesting busing to/from:

(Please check only one box – separate forms must be used for different schools)

- Christa McAuliffe (4151)     Oasis ES (4143)     Oasis MS (4171)     Oasis HS (4181)

**Please PRINT all information.**

				<b>New Rider?</b>	
				Yes	No
_____	_____	_____	_____		
Student Name	Grade	Gender	Birth Date	Yes	No
_____	_____	_____	_____		
Student Name	Grade	Gender	Birth Date	Yes	No
_____	_____	_____	_____		
Student Name	Grade	Gender	Birth Date	Yes	No
_____	_____	_____	_____		
Student Name	Grade	Gender	Birth Date	Yes	No

\_\_\_\_\_ Apt # \_\_\_\_\_  
Home Address (Bus stops are assigned based on the residential address on file)

\_\_\_\_\_ Cell Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_  
Home Phone

\_\_\_\_\_ Date \_\_\_\_\_  
Parent/Legal Guardian Name

<b>TO BE COMPLETED BY SCHOOL:</b>	
REC: Date Received: _____	Bus requested entered in CSADS <input type="checkbox"/>
Student ID#s: _____	
IS: Address Verified <input type="checkbox"/>	date to TC _____
TC: Date Faxed to LC _____	Assigned to stop <input type="checkbox"/>
REC: Stop info entered in CSADS <input type="checkbox"/>	Notified parents on _____