

STUDENT'S LAST NAME \_\_\_\_\_

WEST CLERMONT SCHOOL DISTRICT – 2018-2019

PRIVATE/PAROCHIAL OUT OF DISTRICT SCHOOLS REQUEST FORM (K-8)

**PLEASE RETURN BY JULY 27, 2018**

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Father's CELL \_\_\_\_\_ WORK \_\_\_\_\_ EMAIL \_\_\_\_\_

Mother's CELL \_\_\_\_\_ WORK \_\_\_\_\_ EMAIL \_\_\_\_\_

Name of Student(s)	SCHOOL	GRADE	TRANSPORTATION NEEDS (CHECK ONE)
_____	_____	_____	AM ___ PM ___ BOTH AM & PM ___
_____	_____	_____	AM ___ PM ___ BOTH AM & PM ___
_____	_____	_____	AM ___ PM ___ BOTH AM & PM ___
_____	_____	_____	AM ___ PM ___ BOTH AM & PM ___
_____	_____	_____	AM ___ PM ___ BOTH AM & PM ___
_____	_____	_____	AM ___ PM ___ BOTH AM & PM ___

*\*West Clermont School District offers transportation for grades Kindergarten through 8<sup>th</sup> Grade only.*

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Please Email form to: West Clermont Transportation at [westcler@petermannbus.com](mailto:westcler@petermannbus.com)

Or fax this form to: 513-752-2376