

Harbins Elementary **TEMPORARY** Transportation Form

Homeroom Teacher: _____ Student Name: _____

Date(s) for this change: _____

IMPORTANT: Requests expire every Friday at 2:45. If the change will occur in two different weeks, a form must be submitted for each week.

Check one box, then complete that column:

CAR <input type="checkbox"/>	BUS <input type="checkbox"/>	Gwinnett After School Program (GASP) <input type="checkbox"/>
<p>Car rider pick-up ends at 3:10 pm Car Rider #: _____</p> <p style="text-align: center;">OR</p> <p>If your child doesn't have a car rider number, who will pick up the student? (ID will be check in car rider line): _____</p>	<p>Bus rider to be delivered to (circle one):</p> <ul style="list-style-type: none"> ● Home ● Great Beginnings ● Other: _____ 	<p>By checking this box, you are telling the school you have already registered this student for the Georgia After School Program.</p> <p>NOTE: The district does not provide transportation home from GASP.</p>

Parent's Name: _____ Signature: _____ Date: _____

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Parent's Name: _____ Signature: _____ Date: _____