



Bus Plan

Week Of _____ Teacher _____

My child _____ will :
Student Name

Ride the Bus to _____ Bus # _____ Daycare each
Name of Daycare - Street Address
day or circle the day of the week **M T W Th F**

Ride the Bus Home to _____ Bus # _____ each day
Street Address
or circle the day of the week **M T W Th F.**

Be Picked up by _____ in the school cafeteria daily or
Name of authorized adult
circle the day of the week **M T W Th F .**

If this information should change, I will fill out a new Bus Plan with the changes and submit it to the Readfield Elementary School Office.

Signed _____ Date _____
Parent/Guardian Signature