



Student Transportation Information Form 2022-2023

Ph: 306-791-8245

REGINA PUBLIC SCHOOL DIVISION #4

Email: transportation@rbe.sk.ca

School: _____ PowerSchool ID #: _____

NEW STUDENT(S) ☐ CHANGE FOR EXISTING RIDER(S) ☐ EXCEPTION REQUEST ☐

PLEASE NOTE: IT CAN TAKE UP TO 5 DAYS TO PROCESS YOUR APPLICATION

1. Last Name: _____ First Name(s): _____ Gender: F ☐ M ☐

Date of Birth: Month _____ Day _____ Year _____

Grade: _____ (If K, note Schedule) A ☐ B ☐ Program: French ☐ English ☐ Spec Ed (indicate program): _____

2. Last Name: _____ First Name(s): _____ Gender: F ☐ M ☐

Date of Birth: Month _____ Day _____ Year _____

Grade: _____ (If K, note Schedule) A ☐ B ☐ Program: French ☐ English ☐ Spec Ed (indicate program): _____

3. Last Name: _____ First Name(s): _____ Gender: F ☐ M ☐

Date of Birth: Month _____ Day _____ Year _____

Grade: _____ (If K, note Schedule) A ☐ B ☐ Program: French ☐ English ☐ Spec Ed (indicate program): _____

HOME ADDRESS:

Apt/Unit #: _____ Address: _____ Postal Code: _____

Phone Number: _____ Email: _____

Parent #1: _____ Cell/Work Phone #: _____

Parent #2: _____ Cell/Work Phone #: _____

ALTERNATE ADDRESS: If pick up and drop off are other than HOME address (such as Childcare Provider)

Alternate Name: _____

Address: _____ Phone #: _____

*Please note: Transportation cannot accommodate alternating schedules. We can only accommodate set days per week remaining the same each week.

Please indicate transportation below: H = Thursday

PICK UP: Home: M T W H F
☐ ☐ ☐ ☐ ☐

RETURN: Home: M T W H F
☐ ☐ ☐ ☐ ☐

Alternate: M T W H F
☐ ☐ ☐ ☐ ☐

Alternate: M T W H F
☐ ☐ ☐ ☐ ☐

PICK UP NOT REQUIRED: ☐

RETURN NOT REQUIRED: ☐

Date Required: _____ NOTES: _____

Name(s) of sibling(s) transported: _____

For bussing inquiries, call dispatch 306-546-4022 For changes and eligibility, call 306-791-8245 (school division)

PICK UP STOP: _____ TIME: _____ (approx.)

Route: _____ Existing Stop ☐ New Stop ☐ Bus Color: _____ Vendor (taxi) / bus driver: _____

DROP OFF STOP: _____ TIME: _____ (approx.)

Route: _____ Existing Stop ☐ New Stop ☐ Bus Color: _____ Vendor (taxi) / bus driver: _____

Qualify ☐ Exception ☐ > Granted ☐ Denied ☐ reason: _____

EFFECTIVE DATE: _____ Database updated by/on: _____

SPECIAL INSTRUCTIONS: _____

Copy for bussing ☐ Copy for school ☐ Copy for LVT ☐ SCHOOL PLEASE CALL PARENTS ☐ PARENTS CALLED ☐

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