

WETASKIWIN REGIONAL PUBLIC SCHOOLS

"Inspiring students to become the best they can be."

FORM 16-1

APPLICATION FOR TRANSPORTATION

SURNAME	GIVEN NAME	GRADE	SCHOOL
CIVIC ADDRESS: OR BLUE SIGN:			
			_
PARENT/ GUARDIAN:		PHON	E:
PARENT/ GUARDIAN:	PHONE:		

Please describe any conditions, medical or otherwise, you would like the driver to know:

Transportation Fee: The Transportation Fee is determined annually by The Board. Payment will be processed on the student's account in accordance with the Transportation Fee Schedule. Non-payment of transportation fees will result in students being disallowed from riding the bus.

Transportation is requested to start in the school year:

I have read and understand Transportation Policies and Administrative Procedures

Date (DD/MM/YY)

RETURN THIS APPLICATION TO: transportation@wrps11.ca OR

Form must be downloaded for this button to work. You will be directed to your email account to finalize.

In accordance with the Freedom of Information and Protection of Privacy Act (FOIP Act), personal information collected on this form is part of the district registration process and is authorized under the provisions of the School Act and its regulations, and also under Section 33 c of the FOIP Act. All personal information collected during the registration process and during the course of the school year will be used to provide an educational program and ensure a safe and secure school environment. If you have questions, contact the FOIP Coordinator at (780)352-6018.