

Jackson City School

STUDENT T-CODE VERIFICATION DATE: _____

The Jackson Independent Board of Education is updating student transportation records. Please have a parent or guardian complete this form for each student and return it to the student’s teacher. **If not completed by student or parents, then a school official (teacher, clerk or other) may interview the student and complete the form. Information must be verified and entered into the KSIS for each student.**

STUDENT NAME: FIRST: _____ MIDDLE: _____ LAST: _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS (if different than above): _____

HOME TELEPHONE: _____ CELL NUMBER: _____

BUS RIDER INFORMATION

In general, as a matter of routine:

RIDER INFORMATION	YES	NO
I DO NOT RIDE THE BUS		
I RIDE THE BUS TWICE DAILY OVER ONE MILE		
I RIDE THE BUS ONCE DAILY OVER ONE MILE		
I RIDE THE BUS TWICE DAILY UNDER ONE MILE		
I RIDE THE BUS ONCE DAILY UNDER ONE MILE		

BUS NUMBER THAT PICKS YOU UP AT HOME: _____ BUS NUMBER THAT DROPS YOU OFF AT HOME: _____

For school use only: T-code assigned in IC _____

Subsequent change notes (used to document any changes to the information above during the school year)

1) _____

2) _____

3) _____