



# SCHOOL BUS APPLICATION

Pupil's name	Year group	Starting date for bus service

Home address	
Bus Route #	Bus Stop #

Emergency contact			
The information you provide is very important to school bus operations. Please make sure it is accurate.			
Guardian's name		Guardian's mobile	
Father's mobile		Mother's mobile	

Walk home alone application (only applicable for pupils of Year 5 and above. If no choice is made, the default option is for parents to pick up and drop off pupils.)

☐ I am responsible for the safety of my child(ren) from the residence to the pick-up stop in the morning and from the drop-off stop to the residence in the afternoon. I fully understand and confirm that my child(ren) can go from residence to the pick-up stop alone to get on the School Bus, or from drop-off stop to residence alone to go home. I have ensured sufficient safety protection. I am fully responsible for any and all safety issues on the way, and my child(ren)'s safety responsibilities are irrelevant to the school and/or teachers.

☐ Parents will drop off the pupil in the morning, pick up from the bus stop to home.

Parents' signature	Date