



Akron Public Schools Request For Transportation

2017-2018

****This form MUST be turned in to Central Registration/Transportation AFTER to April 1, 2017****

This form must be turned in at least 4 weeks prior to school starting in order for student/s to receive transportation services at the beginning of the school year. Failure to do so could result in a 10-15 day delay in providing transportation services.

Please fill in and mark all that apply: ****This RFT is valid for the ENTIRE 2017-2018 school year only for grades KG - 8th ONLY****

Date of Request: _____ New Student/Change in Guardianship Requesting Bus Transportation
For School Year: _____ Change of Address Application Change of School Application

**** YOU MAY LIST UP TO 5 CHILDREN ON THIS FORM - AS LONG AS THEY RESIDE IN THE SAME HOUSEHOLD WITH PARENT/ GUARDIAN AND ALL ATTEND THE SAME SCHOOL.**

****ONLY ONE SCHOOL MAY BE LISTED PER APPLICATION. PLEASE MARK THE APPROPRIATE SCHOOL OF ATTENDANCE BELOW:**

- | | | |
|--|---|--|
| <input type="checkbox"/> (12060) Akros Middle School | <input type="checkbox"/> (113050) Arlington Christian Academy | <input type="checkbox"/> (60657) Chapel Hill Christian - North |
| <input type="checkbox"/> (71571) Chapel Hill Christian - South | <input type="checkbox"/> (134221) Colonial Prep | <input type="checkbox"/> (134460) Cornerstone Community School |
| <input type="checkbox"/> (67611) CVCA Christian | <input type="checkbox"/> (133538) Edge Academy | <input type="checkbox"/> (120865) Emmanuel Christian Academy |
| <input type="checkbox"/> (143248) Faith Islamic | <input type="checkbox"/> (11381) GSEL/SCOPE | <input type="checkbox"/> (57513) Holy Family |
| <input type="checkbox"/> (14121) Imagine Leadership | <input type="checkbox"/> (11947) Imagine Kindergarten | <input type="checkbox"/> (57232) Immaculate Heart of Mary |
| <input type="checkbox"/> (64915) Lake Center Christian | <input type="checkbox"/> (14066) Main Street Prep | <input type="checkbox"/> (54171) Mayfair Christian Academy |
| <input type="checkbox"/> (134213) Middlebury Academy | <input type="checkbox"/> (10210) Northside Christian Academy | <input type="checkbox"/> (60848) Old Trail |
| <input type="checkbox"/> (56937) Our Lady of the Elms | <input type="checkbox"/> (60368) Redeemer Christian Academy | <input type="checkbox"/> (10582) S.U.P.E.R. Learning Center |
| <input type="checkbox"/> (57521) Sacred Heart | <input type="checkbox"/> (126599) Seton Catholic | <input type="checkbox"/> (96693) Spring Garden Waldorf |
| <input type="checkbox"/> (56994) St Anthony of Padua | <input type="checkbox"/> (57182) St. Augustine | <input type="checkbox"/> (57018) St. Francis de Sales |
| <input type="checkbox"/> (57034) St. Hilary | <input type="checkbox"/> (57240) St. Joseph - Cuyahoga Falls | <input type="checkbox"/> (60062) St. Joseph - Mogadore |
| <input type="checkbox"/> (57067) St. Mary | <input type="checkbox"/> (57075) St. Matthew | <input type="checkbox"/> (57083) St. Paul |
| <input type="checkbox"/> (60962) St. Sebastian | <input type="checkbox"/> (5709) St. Vincent | <input type="checkbox"/> (12627) STEAM Academy |
| <input type="checkbox"/> (14927) STEEL Academy | <input type="checkbox"/> (133587) Summit Academy - Elem. | <input type="checkbox"/> (132779) Summit Academy - Middle |
| <input type="checkbox"/> (96966) Summit Christian School | <input type="checkbox"/> (65722) The Lippman School | <input type="checkbox"/> (14063) University Academy |
| <input type="checkbox"/> Other: _____ | | |

Please print all information listed below:

Student Name: _____	Grade: _____	Birthdate: _____
Student Name: _____	Grade: _____	Birthdate: _____
Student Name: _____	Grade: _____	Birthdate: _____
Student Name: _____	Grade: _____	Birthdate: _____
Student Name: _____	Grade: _____	Birthdate: _____

School use only!
Student SSID #
ID: _____
ID: _____
ID: _____
ID: _____
ID: _____

****PROOF OF RESIDENCY, NO MORE THAN 60 DAYS OLD, IS REQUIRED TO ACCOMPANY THIS FORM.**

FAILURE TO DO SO WILL PREVENT TRANSPORTATION SERVICES FROM BEING PROVIDED. All proof of residency must have a visible process/statement date and be computerized. See Parent Guidelines for further information.

The above-named student(s) reside/s at the following address **with** parent/guardian(s):

Parent/Guardian Name(s): _____
 Relationship: _____ Legal Guardianship: Yes No Temp Permanent
 Address: _____ Apt: _____
 City: _____ OH Zip Code: _____ Phone Number: _____
 Additional phone number(s): _____

****NOTE: You are required to complete an NEW RFT anytime there is a change in School, Address, or Guardianship.**

***All proof of residency must have a visible process/statement date and be computerized. See Parent Guidelines for further information.**

By completing this form and turning it in to Central Registration/Transportation you agree to all the stipulations listed herein.

Parent/Guardian Signature: _____ Date: _____ RFT - revised 1/17

You must be at least over 2.0 miles from school of attendance in order to qualify. Other restrictions apply. Stops may be up to a 1/4 mile away from residential address.

By marking here, I agree that I am willfully refusing transportation services offered by Akron Public Schools. I realize that I may re-apply if necessary.