



Jefferson Parish Schools
 501 Manhattan Boulevard
 Harvey, Louisiana 70058-4495
 (504) 349-7901

Pre-K and Kindergarten Transportation Agreement

The following rules for student transportation **MUST** be adhered to:

- The child must wear the mandatory **PURPLE** school logo shirt every day.
- The child must wear the name tag provided by the teacher every day for the first 2 months of school. After that date, the school may decide to continue the use of the name tags or choose to have the information connected or printed on the child's school bag.
- The parent or a designee that is 12 years or older (with the exception of a student with special needs who require a person that is 16 years or older) must be at the bus stop to place the child on the bus in the morning and receive the child from the bus in the afternoon.
 - o Below are the names and working phone numbers of all designees that my child may be released to at the bus stop or car rider line. It is the **parent's** responsibility to supply the bus driver and school with any change of phone numbers and/or designees. The parent further acknowledges that all designees listed below meet the age requirement listed above.

Name of designee(s): _____ Phone #: _____

- Parents who transport their children to and from school each day must adhere to the rule that the parent or designee must be on time dropping off and picking up the child to and from school each day.

CONSEQUENCES OF RULE VIOLATIONS

1 st Incident	Warning from teacher by phone and note.
2 nd Incident	Conference with teacher and/or principal.
3 rd Incident	Bus transportation privileges suspended until parent conference is held and the problem is resolved. Continues incidents will result in transportation becoming the responsibility of parent.
	***Three or more incidents of late pick up may result in the child being dropped from the PK4 class.

I have read and understand the rules stated above. I understand that if the above rules are not followed my child's bus transportation privilege will be suspended and my child may be in danger of being dropped from the PK4 class.

Child's Name:

Does child have special needs bus? Yes or No

Address:

Bus #:

Teacher:

Parent's Signature:

Date:

Teacher's Signature:

Date:

COPIES TO: Bus Driver School Parent or Guardian Teacher