



Dear Parents.

It is the time of year that we start planning for next year's enrollment!! Please indicate if you are or are not planning on your child attending Akros Middle School for the 2019/2020 school year.

____ Yes, (child's name) _____ will be attending Akros Middle School for the 2019/2020 school year.

____ **No**, (child's name) _____ will not be attending Akros Middle School for the 2019/2020 school year.

I understand that by saying no my child will be taken off the class roster.

Your child will automatically be removed from the class roster if this form is not returned by March 22, 2019.

PLEASE FILL OUT ATTACHED BUS FORM IN ORDER TO HAVE BUSSING FOR THE 2019/2020 SCHOOL YEAR!!CHECK OPT OUT PLEASE, IF NO TRANSPORTATION IS NEEDED. Also Please provide a new proof of residency dated after March 1st, 2019.

Parent/Guardian signature _____



Attention Parents:

When filling out the bus form please use the following options:

- Updated student needs checked if your student is new to our school, has never been bussed, your student has a new address, student has a change of guardianship
- Renewal with no changes needs checked when your student has the same address, school and guardianship as previous year

If your student will not be riding a bus to or from school I still need you to fill out the bus form and check the option for opt out of all transportation services. If change your mind you can always reapply for bussing at that time.

REQUIRED ITEMS FOR COMPLETION

- Form request type (only 1 type)
- School of attendance (only 1 school)
- Student Name
- Student Birthdate
- Student Grade Level
- Guardian Name
- Guardian Relationship
- Complete Address
- Contact Number/s

APPLICABLE DOCUMENTATION

* **Proof Of Residency** -

Must be current, no more than 60 days old

Can be One of the following:

Bank Statement, Paystub, Billing Statement, Letter from Government or Legal Agency, Lease, Computerized Rental Receipt, Utility Bill or Turn On Notification, USPS Change of Address Confirmation Letter

* **Custody Information** (if applicable)

Must be court stamped and in its entirety

* **Birth Certificate** (if applicable)

Suggested for all new students and students that have never been enrolled in Akron Public Schools to enable quick processing of request

Transportation Contact Info:

Akron Public Schools	330-761-1390
Petermann Bus Co.	330-773-4222
Central Registration/ Transportation	330-761-2738

****NOTE: Schools are not responsible for the completion of this form nor submitting this form to Akron Public Schools**

RFT GENERAL INFORMATION

- Must reside within the Akron Public School District
- Yellow Bus transportation service only
- May list up to 4 students on this form
- Only **one** school may be listed per form
- Must reside over 2.0 miles from school of attendance
- Must be under 30 min travel time
- Required yearly and/or any time there are changes in school, address, and/or guardianship
- Must be turned in 4 weeks prior to school starting at the beginning of school year for transportation service when school starts
- May apply year-round once school is in session
- Late entry at beginning of school year may cause a 10-15 day delay in processing (not counting holidays and weekends)
- Payment-in-Lieu is at the discretion of Akron Public Schools.
- Denial letters mailed to residence
- Can re-apply at any time

BUS STOP INFORMATION

- Stops may be up to 1/2 mile from residence
- Buses will not wait for students for more than 1 min from normally scheduled time
- KG & 1st grade students must be accompanied at stop location by an adult
- Services cancelled after 15 school days of inactivity
- When Akron Public Schools is closed for inclement weather no transportation services will be provided.

Request For Transportation

For Charter, Parochial, and
Non-Public Schools

Grades KG—8th only



**Akron Public
Schools®**

*Helping to serve our Community, Schools,
and Families one child at a time!*

Choose only one for this form:

Updated/New Student

- New to School
- New to Transportation Services
- Change of Address
- Change of Guardianship

Renewal With No Changes

- At Same School as previous year
- At Same Address as previous year
- Same Guardian as previous year

Alternate Transportation

- Service To Another Residential Address

Required for Alternate Transportation:

- Updated/New Student form for home residence
- Current Proof of Residency for home residential residence
- Alternate Transportation form for other residential address
- Current Proof of Residency for other residential address
- Notarized Letter Requesting Transportation from other residential address
- Notarized Letter Signed by Residential Guardian **AND** Other Residential Party

NOTE: Alternate Transportation is at the sole discretion of Akron Public Schools. We are not legally required to provide transportation from any residence other than home residence. Alternate Transportation is not guaranteed. The home residence must qualify for transportation services before alternate transportation services would be considered.

I am choosing to opt out of ALL transportation services, including payment-in-lieu. I may reapply at another time.

RETURN TO:

Akros Middle School
Tammy Keen
265 Park St.
Akron, Ohio 44304
Fax 330.374.6713
tkeen@akros4kids.org

Choose only ONE SCHOOL for this form:

- | | |
|---|--------|
| <input type="checkbox"/> Akron Preparatory School | 13254 |
| <input type="checkbox"/> Akros Middle School | 12060 |
| <input type="checkbox"/> Arlington Christian Academy | 113050 |
| <input type="checkbox"/> Chapel Hill Christian—NORTH | 60657 |
| <input type="checkbox"/> Chapel Hill Christian—SOUTH | 71571 |
| <input type="checkbox"/> Canton College Preparatory | 13255 |
| <input type="checkbox"/> Cornerstone Community | 134460 |
| <input type="checkbox"/> CVCA Christian | 67611 |
| <input type="checkbox"/> Edge Academy | 133538 |
| <input type="checkbox"/> Emmanuel Christian Academy | 120865 |
| <input type="checkbox"/> Faith Islamic | 143248 |
| <input type="checkbox"/> GSEL/SCOPE | 11381 |
| <input type="checkbox"/> Holy Family | 57513 |
| <input type="checkbox"/> Imagine Leadership (1st-6th) | 14121 |
| <input type="checkbox"/> Imagine Akron Academy (KG) | 11947 |
| <input type="checkbox"/> Immaculate Heart of Mary | 57232 |
| <input type="checkbox"/> Julie Billiard of St Sebastian | 16974 |
| <input type="checkbox"/> Lake Center Christian | 64915 |
| <input type="checkbox"/> Main Street Preparatory | 14066 |
| <input type="checkbox"/> Mayfair Christian Academy | 54171 |
| <input type="checkbox"/> Middlebury Academy | 134213 |
| <input type="checkbox"/> Our Lady of The Elms (KG-8th) | 56937 |
| <input type="checkbox"/> Old Trail | 60848 |
| <input type="checkbox"/> Redeemer Christian Academy | 60368 |
| <input type="checkbox"/> S.U.P.E.R. Learning Center | 10582 |
| <input type="checkbox"/> Spring Garden Waldorf | 96693 |
| <input type="checkbox"/> St. Anthony of Padua | 56994 |
| <input type="checkbox"/> St. Augustine | 57182 |
| <input type="checkbox"/> St. Francis de Sales | 57018 |
| <input type="checkbox"/> St. Hilary | 57034 |
| <input type="checkbox"/> St. Joseph—Cuyahoga Falls | 57240 |
| <input type="checkbox"/> St. Joseph—Mogadore | 60012 |
| <input type="checkbox"/> St. Mary | 57067 |
| <input type="checkbox"/> St. Matthew | 57075 |
| <input type="checkbox"/> St. Sebastian | 60962 |
| <input type="checkbox"/> St. Vincent de Paul | 57109 |
| <input type="checkbox"/> STEAM Academy | 12627 |
| <input type="checkbox"/> STEEL Academy | 14927 |
| <input type="checkbox"/> Summit Academy Elementary | 133587 |
| <input type="checkbox"/> Summit Academy Middle | 132779 |
| <input type="checkbox"/> Summit Christian School | 96966 |
| <input type="checkbox"/> The Lippman School | 65722 |
| <input type="checkbox"/> Total Education Solutions | 17448 |
| <input type="checkbox"/> University Academy | 14063 |

OTHER: _____

***For School Year: 20 ___/20 ___ (required)**

The following information is REQUIRED:

1st Student: _____

DOB: _____ Grade: _____ [_____]

2nd Student: _____

DOB: _____ Grade: _____ [_____]

3rd Student: _____

DOB: _____ Grade: _____ [_____]

4th Student: _____

DOB: _____ Grade: _____ [_____]

All information below is required to be completed:

Parent/Guardian Information

(If married **AND** residing together, both names **must** appear on form)

Alternate Transportation Information

Name: _____

Relationship to Student: _____

Legal Guardian? ___ Yes ___ No

Custody ___ Yes Case Number: _____

___ Divorced/Residential ___ Court-Placed ___ No

Address: _____

Apt. _____ **City:** _____ **Zip:** _____

All-Call Number: _____

First Contact Number: _____

By signing this (required), I agree that I have read and agree to the stipulations listed. Further, I am requesting consideration for transportation services for the above-named student/s.

X _____ X _____
Signature of Requestor Date

Office Use ONLY: ___ MKV ___ Apprv ___ DMILE ___ OTH _____