

**WILLIAM PENN SCHOOL DISTRICT
TRANSPORTATION REQUEST
NON-PUBLIC STUDENT INFORMATION FORM
2015 – 2016**

** Please print when completing this form **

School: _____

Address: _____

Student: _____

Last First Middle

St. Address: _____

Number Street Apt. No.

City State Zip

Sex: _____ **Date of Birth:** _____ **Grade:** _____ (2015-2016)

Parent/Guardian: _____

Relationship: _____

Parent/Guardian Telephone #: _____

Emergency Contact Name: _____

Emergency Contact Phone #: _____

Please return **COMPLETED** forms to:

**Nicholas A. Kraynak
Operations Supervisor
William Penn School District
100 Green Ave.
Lansdowne, PA. 19050
610-284-8005 ext. 1250
610-284-8054 Fax
nkraynak@wpsd.k12.pa.us**