Harbins Elementary TEMPORARY Transportation Form

Homeroom Teacher: ___________________________ Student Name: ___________________________

Date(s) for this change: ___________________________

IMPORTANT: Requests expire every Friday at 2:45. If the change will occur in two different weeks, a form must be submitted for each week.

Check one box, then complete that column:

<table>
<thead>
<tr>
<th>CAR</th>
<th>BUS</th>
<th>Gwinnett After School Program (GASP)</th>
</tr>
</thead>
<tbody>
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Car rider pick-up ends at 3:10 pm
Car Rider #: ____________

OR
If your child doesn’t have a car rider number, who will pick up the student?
(ID will be check in car rider line):

________________________

Bus rider to be delivered to (circle one):

- Home
- Great Beginnings
- Other: ____________________

By checking this box, you are telling the school you have already registered this student for the Georgia After School Program.

NOTE: The district does not provide transportation home from GASP.

Parent’s Name: ___________________________ Signature: ___________________________ Date: ________