



DAY CARE TRANSPORTATION REQUEST FORM

Child Care / Adventures Plus / Parent Transport

2727 N. Ferry St, Anoka, MN 55303 • Phone: 763-506-1125 • FAX: 763-506-1133
 email: transportation@ahschools.us • www.ahschools.us/transportation

Student Information

THIS FORM MUST BE COMPLETED EVERY YEAR. For families with multiple students, please fill out one form for each student.

School Name _____ Grade 2023-2024 _____

Last Name _____ First Name _____ Middle Initial _____ Birth Date _____

Student Address _____ City _____ Zip Code _____

Requested Start Date: ____/____/____ or First Day of School

*****COMPLETE THIS FORM ONLY IF YOUR CHILD ATTENDS DAYCARE OR ADVENTURES PLUS*****

AM REQUEST			PM REQUEST		
CHOOSE UP TO TWO			CHOOSE ONLY ONE		
<input type="checkbox"/> Bus from Home	<input type="checkbox"/> Bus from Child Care		<input type="checkbox"/> Bus to Home	<input type="checkbox"/> Bus to Child Care	
<input type="checkbox"/> Parent Transport	<input type="checkbox"/> Adventures Plus		<input type="checkbox"/> Parent Transport	<input type="checkbox"/> Adventures Plus	
Child Care/Adventures Plus Provider Name			Child Care/Adventures Plus Provider Name		
Child Care/Adventures Plus Address	City	Zip	Child Care/Adventures Plus Address	City	Zip
Telephone Number			Telephone Number		

FOLD HERE

Parent / Guardian Information

First and Last Name _____ Home/Primary Telephone _____ Alternate Telephone _____

The Anoka-Hennepin School District requires that a parent or legal guardian submit a written request for transportation to a child care provider no later than May 31, 2023. Requests can take up to five (5) school days to process.

The Anoka-Hennepin School District provides transportation to and from child care providers for eligible students in grades K-12. Students may have two pick-up locations but only one drop-off location.

My signature certifies that I am the parent/legal guardian of the above student and am authorized to request transportation to/from the Child Care/Adventures Plus listed above.

Signature _____ Date _____

*** Please seal this form with tape. DO NOT STAPLE.