

West Salem School District Bus Information



Student's Name:				Grade:	
Student's	Name:			Grade:	
Student's	Name:			Grade:	
Parent's N	ame:				
Home Addre	ss:				
Telephone:			Today's Date:		
*****	*****	*****	*****	*****	
School I	nformat	ion			
□ WS Eleme	ntary 🗆 1	WS Middle \square	WS High		
□ Coulee C	hristian So	chool			
□ Christ S	t. John's				
PICK-UP	LOCATIO	N			
□ Home	House #	Street Name	Unit #	Home Phone #	
□ Daycare _	House #	Street Name			
Daycare H	Provider's	Name			
DROP-OFF	' LOCATIO	ON			
□ Home	House #	Street Name		Home Phone #	
□ Daycare _	House #	Street Name			
Davcare I	Provider's	Name			