



STUDENT TRAVEL DATA

To ensure the School Administration has updated information of students travel details in the event of bad weather or flooding ~ could you please complete the following form and return to the school office as soon possible.

This information is vital in the event of an emergency and the school has to get students home in a hurry.

STUDENT FAMILY NAME:

CHRISTIAN NAME

CLASS

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RESIDENTIAL ADDRESS: \_\_\_\_\_

(Please tick relevant travel)	Bus	Car	Walk	Bicycle	Other
Monday	am pm	am pm	am pm	am pm	am pm
Tuesday	am pm	am pm	am pm	am pm	am pm
Wednesday	am pm	am pm	am pm	am pm	am pm
Thursday	am pm	am pm	am pm	am pm	am pm
Friday	am pm	am pm	am pm	am pm	am pm

{Please circle relevant times your student/s travel}

Bus Company: \_\_\_\_\_

Bus Route Number: \_\_\_\_\_

Bus Run Code: \_\_\_\_\_

Name of Driver: \_\_\_\_\_

Parent/Guardian/Carer Signature: \_\_\_\_\_

Date: \_\_\_\_\_