Logan Elm Local School District Transportation Registration School Year: 2025-2026

School	Use Only
Driver / Bus #:	/
PM Slot:	
Pick-Up Time:	
Drop-Off Time:	

Student Information (please print clearly and return form to school or mail to: Logan Elm District Office 9579 Tarlton Road, Circleville, OH 43113 Attention Transportation Department

Logan Elm District Off	ice 95/9 Tariton Road, C	Jircieville, OH 43113 Atten	mon Transportation Department)
Student Name:			
School Building:	Grade:		
Physical Address of	Street		
Residence: (no P.O. Box)	City		
Parent/Guardian:	,		
Phone:	Home:	Mobile:	Other:
Will the above student		transportation in 2025-2026	school year?
□ NO	Sign form below and return to school.		
☐ YES	Complete below section on desired pick-up / drop-off locations		
	entation for exceptions du Same as residence ab		ld Care Provider
Address:	Street:		
	City: Zip:		
On-Site Contact:	Name: Phone:		
Drop-Off Location:	☐ Same as residence al	bove □ Relative □ Ch	nild Care Provider
Address:	Street:		
	City: Zip:		
On-Site Contact:	Name: Phone:		
Note: Due to traffic saf or drop-off location ma Administrative Code (O	y not be the exact address	the practicality of consolidate requested above, but one n	ed stop sites, your child's approved pio earby and in compliance with Ohio
Parent/Guardian Signature:		Date	::