

Heritage Intermediate School
Home Connection

Transportation Changes/Illness/Attendance

Student _____

Date _____

Teacher _____

TRANSPORTATION

(Students are only permitted two bus options in AM and PM. Choose one or two.)

After School Student will: _____ go to Boy's and Girl's Club on Bus # _____
_____ go home on Bus # _____
_____ go to second (alternate) stop on Bus # _____

Address for Alternate Stop: _____

** Changes must be approved by the office.*

Student will be picked up by _____
at _____ (AM/PM).

ILLNESS

Student is returning to school after an absence of _____ day(s) due to _____

(Please make every effort to attach a doctor's note to this sheet for attendance verification)

Other _____

ATTENDANCE

Student will not be in school (date) _____ because _____

PARENT OR GUARDIAN SIGNATURE _____