



Living Sky School Division No. 202

Form Name:	Living Sky School Division Transportation Request
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Last Reviewed:	June 2025
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*This application is for kindergarten to Grade 12 students only.
Please contact the school regarding applications for prekindergarten students.*

Busing start date:		<input type="checkbox"/> new student/family <input type="checkbox"/> changes to student information
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Parent/Guardian:		Parent/Guardian:	
Home Address:		Home Address:	
Mobile Phone:		Mobile Phone:	
Home Phone:		Home Phone:	
Work Phone:		Work Phone:	

Legal Land Description:					W of 3rd
	(NE, NW, SE or SW)	(Section)	(Township)	(Range)	
Can a bus turn around in your driveway?		<input type="checkbox"/> Yes <input type="checkbox"/> No			

Student Information					
Name:		School:		Grade:	
Name:		School:		Grade:	
Name:		School:		Grade:	
Name:		School:		Grade:	
Name:		School:		Grade:	
Name:		School:		Grade:	

Please list below any information that the bus driver needs to be aware of (health, custody, pick-up/drop-off, etc.)

CENTRAL OFFICE USE ONLY					
Bus Driver:		Bus Route:			
Comments:					
Driver informed <input type="checkbox"/>	Method:		Date:		

Submit form to lsky.trans@lskysd.ca, fax: 306-445-4332 or drop off to 509 Pioneer Avenue