

OUT OF DISTRICT SCHOOL TRANSPORTATION NOTIFICATION



In accordance with KSA 72-3124, effective July 1, 2023, this form is to notify:

USD _____ that USD _____
 will be providing transportation for these students during the _____ school year.

These students are residents of USD _____

Student Number:	Student First Name	Student Last Name	Grade	Male	Female
	Street Address	City	, Kansas		
					Zip Code

Student Number:	Student First Name	Student Last Name	Grade	Male	Female
	Street Address	City	, Kansas		
					Zip Code

Student Number:	Student First Name	Student Last Name	Grade	Male	Female
	Street Address	City	, Kansas		
					Zip Code

Student Number:	Student First Name	Student Last Name	Grade	Male	Female
	Street Address	City	, Kansas		
					Zip Code

Student Number:	Student First Name	Student Last Name	Grade	Male	Female
	Street Address	City	, Kansas		
					Zip Code

Student Number:	Student First Name	Student Last Name	Grade	Male	Female
	Street Address	City	, Kansas		
					Zip Code

Student Number:	Student First Name	Student Last Name	Grade	Male	Female
	Street Address	City	, Kansas		
					Zip Code

Student Number:	Student First Name	Student Last Name	Grade	Male	Female
	Street Address	City	, Kansas		
					Zip Code

Student Number:	Student First Name	Student Last Name	Grade	Male	Female
	Street Address	City	, Kansas		
					Zip Code

I hereby certify I have sent a copy of this notification form to USD _____

 Official Signature of Transporting District
 USD _____

 Date

Please Note: This form must be resubmitted every year