BOARD OF EDUCATION, DISTRICT 148
DOLTON, COOK COUNTY, ILLINOIS

STUDENT TRANSPORTATION REQUEST

HOMELESS STUDENT RESOLUTION PROCESS

Submitted by: ___Principal ___Support Programs ___Parent/Guardian

School _____ Date _____

Student's Name _____ Birth Date ____/____/____

Grade _____ Parent(s) Name _____

Current Address _____

Telephone Number ( ) _____

Residing in Shelter ____Yes ____No Shelter _____

Shelter Address _____

Shelter Telephone Number ( ) _____

School in Which Student Requests Enrollment _____

School of Origin / School from Which Student Transferred _____

Reason for Request: _____

_____

_____

Action: _____

_____

_____

_____ _____
Parent/Guardian Signature Date

_____ _____
Principal Signature Date

_____ _____
Transportation Director Signature Date

P-25
4/05