



Saginaw Academy of Excellence • 1300 Malzahn St. • Saginaw, MI 48602 • (989) 717-4390

Returning Students Bus Application

My child(ren) needs transportation for the 2022-23 school year? Yes _____ No _____

- If **No**, complete Section 1 ONLY and return to the school office.
- If **YES**, please complete ALL sections of this form and return to the school office.

Section 1 (Student's Names)

Student Name: _____	Grade: _____
Student Name: _____	Grade: _____
Student Name: _____	Grade: _____
Student Name: _____	Grade: _____

Section 2 (Parent Information with Pick-up/Drop-off Address)

Parent #1 _____	Phone: _____
Parent #2 _____	Phone: _____
Pick-Up/Drop-Off Address: _____	

Section 2 (List additional adults who are authorized to pick up student(s) from the bus stop)

Name	Relationship	Phone