

Salem City Schools School Bus Pass

Please complete the following form when there are transportation changes.

Student Name _____ Grade _____

Homeroom Teacher (Grades Pre-K to 5) _____

Effective Date(s): _____

Select your school

The Above Student
Will Ride Bus Number _____

_____ Andrew Lewis Middle School

_____ East Salem Elementary School

_____ G.W. Carver Elementary School

_____ Salem High School

_____ South Salem Elementary School

_____ West Salem Elementary School

Today Only _____

All Week _____

Until Further
Notice _____

Enter an approved bus stop and include the bus stop address or cross street where the student will be dropped off. _____

Parent Signature: _____ Date _____

Principal or approved
designee signature: _____ Date _____

The student must present this bus pass to the bus driver as they get on the bus.