



**Tell City-Troy Township School Corp.**  
**Bus Form**  
**School Year: 2019-2020**

Dear \_\_\_\_\_,  
 (Teacher)

I have read the revised routes for the Tell City-Troy Township School Corporation for the 2019-2020 school year and want to inform you that my child:

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

**MORNING ROUTE (AM):**

**Will Ride Bus#** 1 2 3 4 5 6 9A 9B 10A 10B 14 15 17 (Circle One)

to school from the bus stop closest to this address: \_\_\_\_\_

which is the bus stop at \_\_\_\_\_ & \_\_\_\_\_ Streets.

**AFTERNOON ROUTE (PM):**

**Will Ride Bus#** 1 2 3 4 5 6 9A 9B 10A 10B 14A 14B 15 16 17 (Circle One)

to the bus stop closest to this address: \_\_\_\_\_

which is the bus stop at \_\_\_\_\_ & \_\_\_\_\_ Streets.

Is this PM address: HOME BABYSITTER OTHER: \_\_\_\_\_ (Circle One)

I understand that I am to contact the bus driver for approximate pick-up and drop-off times, which are subject to change.

Signed,

\_\_\_\_\_  
 Parent/Guardian

\_\_\_\_\_  
 Date

Questions about the routes? Please contact Central Office at 547-3300.

**SEND THIS FORM WITH YOUR CHILD/CHILDREN THE FIRST DAY OF SCHOOL. ONE SHEET PER CHILD. FORMS ARE AVAILABLE ON THE SCHOOL WEBSITE AND IN THE SCHOOL OFFICE. THANK YOU!!**