

EAST PROVIDENCE SCHOOL DEPARTMENT – TRANSPORTATION
1998 Pawtucket Avenue - Door 2
EAST PROVIDENCE, R.I. 02914
TELEPHONE: 401-270-8232 FAX: 401-919-5912

TRANSPORTATION REQUEST FORM
PRIVATE/PAROCHIAL
SCHOOL YEAR 2024-25

Student Information

Name of School _____ Grade _____

Student Name _____

Address _____

_____ RI _____

City _____ *State* _____ *Zip Code* _____

Telephone # _____ Emergency # _____

Telephone # _____ Email Address: _____

Bus Requested for: AM _____ PM _____ Both _____

Days Attending: Monday - Friday _____ or Individual Days: _____

Parent/Guardian Signature _____ *Date* _____

This completed form and Proof of Residence should be sent to: lgoulden@epschoolsri.com

For Office Use Only

Proof of Residence Provided: Lease _____ Mortgage Statement _____ EP Property Tax Bill _____

AM Bus _____ AM Time _____ Stop _____

PM Bus _____ PM Time _____ Stop _____

Approved _____ Denied _____ Reason for Denial _____