



Application for SMART Preschool Route 2020-2021

Applications are due on or before July 17, 2020
(Turn in applications at your preschool.)

Applicant Information

Student's Name _____ (1 student per application)

Age of child on September 1, 2020 _____ Child's gender: Male or Female

Parent(s) Name(s) _____

Home Address _____ City _____

Home Phone Number _____ Parent(s) Cell Phone _____

Email Address _____

Daycare Provider Name _____ Daycare Provider Phone Number _____

Preschool Information

Name of Preschool Attending _____

Circle Days Attending: Monday Tuesday Wednesday Thursday Friday

Class Start Time _____ Class End Time _____

Transportation Information

In choosing your highest need for transportation, please keep in mind that SMART Transit is trying to do their best for you and your family.
In most cases, SMART Transit will only be able to provide 1-way transportation. Where 2-way transportation is the only way a child can attend preschool, SMART Transit will do their best to accommodate.

Please rank your highest need for transportation. (i.e. TO school or FROM school)

Rank as 1 for highest priority and 2 for lowest priority:

_____ Pick up at address: _____ and Bring TO School

Or
_____ Drop off at address: _____ AFTER School

If your child is not placed on the preschool route at all, will your child still be able to attend preschool?

Yes or No

If your child is not given two-way transportation (TO and FROM school), will your child still be able to attend preschool?

Yes or No

Primary language spoken at home: _____ Interpreter needed? Yes or No

My child speaks English: Yes or No

Emergency Contact Information

In the event of an issue or emergency, SMART Transit will attempt to contact the parent(s) using the phone number(s) provided above. Please provide an additional emergency contact in the event you are unavailable.

Name _____ Relationship _____

Phone/Cell Number _____

Release of Information

If my child rides the SMART preschool route, I Give permission to the staff of the preschool, members of the transportation coalition, and employees of SMART Transit to share information about my dependent child and myself that pertains to the safe transportation of my dependent child and others on the bus.

Name (please print) _____

Signature _____

Date _____

If your address changes from the time you turn in this application, you **MUST** contact the preschool and SMART Transit immediately.

Placement on the bus is not guaranteed.

You will be notified by mail the week of August 7th regarding your placement on the bus for the 2020/2021 school year.

If you have questions about the Preschool Route please contact SMART Transit at 1-855-762-7821, the United Way of Steele County at 507-455-1180, or Owatonna Community Education at 507-444-7900.

See you on the bus!

SCHOLARSHIPS

If you feel your family is eligible for a scholarship for preschool transportation, please speak with you preschool Director. Families eligible for free and reduced lunch with the school district generally qualify for free preschool transportation through a grant with the United Way of Steele County.

OFFICE USE ONLY

To be completed by staff of preschool:

Is student eligible for scholarship? YES ___ NO ___

Check when class days and times been confirmed for student: _____