

Greenville County Schools Bus Tag Application (K4, K5, 1st Grade Students)

(K4, K5, 1st Grade Students) 2024-2025

Parent Complete: Please	print and return to t	the school office.
Student's Name:		School:
Parent/Guardian's Name:		
Student's Address:		
City:		Zip Code:
Subdivision:		
Parent Phone Numbers:		
Home:	Work:	Cell:
Emergency Contacts:		
Name:		Name:
Home:		Home:
Cell:		Work:
Name of Fourth/Fifth Grad		Cell:
By signing this form the parent/ the bus stop and is responsible f minutes before or after the sche by the school) matching their ch	for meeting the bus at the duled time.) The parent/nild's tag number for the e their child to the emerge	Bus Stop: Parent is accepting responsibility for the student at e designated stop time. (Buses are subject to arrive 10 /guardian (or designee) must have the official card* (provided e driver to release the child to them. School: Parent is gency contact person(s) (with proper identification) listed
		GCS Backpack app is an acceptable substitute for the numbered ared card is not valid and will not be accepted.
Parent/Guardian Signatu	ıre:	Date:
For School Office Use O	<u>nly</u>	
Grade:	Tea	ncher:
Rt. #:	Sto	p Location:
Student/Parent Tag #:		