



Coventry Christian Schools

699 N. Pleasantview Road
Pottstown, PA 19464
Phone: 610-326-3320
Fax: 610-326-0085

Educating for Life

Request for Transportation Under ACT 372 (complete a separate form for each child)

1. Name of Child _____
Birth Date _____ Grade: _____
2. Home Address _____
P.O. Box (if applicable) _____
3. Primary Emergency contact number: _____
4. Name of Non-Public School attending in 2010-2011:

5. Name of public school district in which the student resides _____
6. The above named child lives approximately _____ miles from attending school.
7. Transportation needed (check): _____ A.M. _____ P.M. _____ Both
8. If the student received transportation last year, please indicate bus or van
number : _____

Date: _____

Parent Signature: _____

Parent (printed name): _____