



Keenan Elementary Transportation Change



Date: _____ Teacher: _____

Name: _____ Grade: _____

Please change my child's transportation TODAY to:

___ Car Rider this Afternoon

___ Bus Rider this Afternoon on Bus# _____

Home Address: _____

___ Will be picked up in the car rider line by _____

___ GOLF ___ TENNIS ___ TOTS ___ OTHER _____

Parent Signature: _____ Date _____

Phone number to reach me at today: _____

****Transportation changes must be made in writing no later than 2:00pm. Changes can be sent with a student, brought to the front desk, faxed to 936-276-5501 or emailed to KeenanTransit@misd.org.**

**** Transportation will not allow students to ride home with friends on a different bus****

CHANGES CANNOT BE MADE BY PHONE.