



## TRANSPORTATION CHANGE

213 Brooks Street Pelahatchie, MS 39145 601.854.8135



Teacher:	
My child:	
will have a different means of transportation:	
□ Today □ Tomorrow □ All Week □ Until Further Notice	
He / She will be a:	
□ Car Rider □ Bus Rider on Bus Number	
to the physical address	
□ Day Care rider with	Day Care
Parent / Guardian Signature:	
Cell Phone:	Daytime: