

**LEBANON MIDDLE SCHOOL
891 EXETER ROAD
LEBANON, CT 06249**

TELEPHONE: (860) 642-4702

FAX NUMBER: (860) 642-3534

BUS ROUTE REQUEST

To: M & J
Lebanon, CT 06249

Date _____

Reason for Request:

- ☐ New Student Date of Enrollment _____
☐ Student Withdrawal Date of Withdrawal _____
☐ Other _____

Request applies to:

Student Name _____

Parent/Guardian Name _____

Residence Address _____
(legal street address)

Student Telephone Number _____

Grade _____

Student ID Number _____

Please fill out and fax back to LMS Main Office. Parents will be notified of bus information

Faxed to M & J on _____ by _____

Bus Number _____ Pick Up Time _____ Drop Off Time _____

Student will be picked up at: _____
(i.e. end of driveway, corner of street, different house #)