

Marbury High School
Phone: 334-387-1910
Fax: 334-387-1920



*Revised 08/12/14

AUTAUGA COUNTY BOARD OF EDUCATION
PUPIL TRANSPORTATION DEPARTMENT
"Bus drivers are the driving force to a good education!"
NEIL MESSICK
TRANSPORTATION SUPERVISOR

STUDENT VERIFICATION OF ADDRESS/BUS ASSIGNMENT

Student Name: _____

Address: _____

Phone #'s: _____

Parent/Guardian: _____

Mr. Messick,

I am requesting bus transportation for my student listed above who has registered and will be attending Marbury High School.

Parent Signature

Date

Address Verified By: _____

FOR TRANSPORTATION OFFICE USE ONLY:	
Bus #: _____	
Driver Name: _____	Phone #: _____
FAXED: _____	Transportation Approval: _____

Please provide a copy of this form to the student and instruct the student to give the form to their bus driver. Please retain a copy for the school's records as well. Drivers will not allow new students to ride their bus without having the proper documentation.

Parents are welcome to call the bus driver at the number given to inquire about pick-up and drop-off times.