

Oglala Lakota College

Transportation Request Form



Student Information

Last Name	First Name	Middle Initial
Mailing Address	City, SD	Zip Code
Home Phone	Cell Phone	Alternate Phone
Primary Email Address	Secondary Email	Student ID

Eligibility:

Degree Seeking Student No transportation

What is your status full-time or part-time?

Freshman Sophomore Junior Senior

What degree are you seeking: _____

When is your expected graduation date: _____

I agree to be 15 minutes early for scheduled departures. I understand that I will have pre-arranged daycare and children are not allowed on the van. I agree to turn in my final schedule the Thursday after course cancellation and understand that any further changes will not be allowed.

Student Signature

Date

Center Director Signature

Date