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**THE OAKRIDGE WALKING SCHOOL BUS  
*“US BUS” PILOT*  
INTEREST FORM QUESTIONS**

***Please answer the following questions for route planning and AM scheduling and submit to  
 APS Safe Routes to School Coordinator lauren.hassel@apsva.us***

**What’s your name?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What’s your email address? (needed to set up Walking School Bus).**

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**What's the name of the civic association where you live?**

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**Please indicate the number of students from your household who will be traveling to school:**

\_\_\_\_\_\_\_\_\_\_\_

**What is the age and grade of your student/s?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Route Planning**

**Bus Eligibility and Walk Zone Maps for every school are posted on the APS website**

***--Use the link below to find the map for OAKRIDGE***

[**Bus Eligibility Zone Maps**](https://www.apsva.us/transportation-services/bus-eligbility-zones/)   
[**https://www.apsva.us/transportation-services/bus-eligbility-zones/**](https://www.apsva.us/transportation-services/bus-eligbility-zones/)

**COVID ‘21 Reopening** [**Expanded Walk Zone Maps**](https://www.apsva.us/transportation-services/sy-2020-21-expanded-walk-zones/) **for affected schools (not Oakridge)**

[**https://www.apsva.us/transportation-services/sy-2020-21-expanded-walk-zones/**](https://www.apsva.us/transportation-services/sy-2020-21-expanded-walk-zones/)

**What intersection is closest to your home? List names of cross streets. (e.g. N Main St and N 12th Road)**

***No need to provide your actual address***

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**Which streets would you take to walk to school? List street names.**

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**Scheduling**

**What days of the week would you be interested in joining the Walking School Bus?**

**Check all that apply. NOTE: The pilot will be doing MORNING/DROP-OFF only.**

* Monday
* Tuesday
* Wednesday
* Thursday
* Friday

**Are you interested in helping to lead the Walking School Bus?**

* Yes
* No

**What days of the week could you help? Check all that apply.**

* Monday
* Tuesday
* Wednesday
* Thursday
* Friday

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE SUBMIT YOUR RESPONSES TO:   
*APS Safe Routes to School Coordinator***[**lauren.hassel@apsva.us**](mailto:lauren.hassel@apsva.us)A picture containing text, sign, yellow

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Description automatically generated A picture containing text, tableware, dishware, plate

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