



AISD SUBURBAN DRIVERS RENEWAL FORM

Please complete the following information, sign, and return this form to Transportation to keep your name on the "Eligible Suburban Driver List"; this must be done annually:

Employee: _____ Employee #: _____

School/Department: _____

I want my name to remain on the "Arlington ISD Eligible Suburban Driver List" for the 200_ - 200_ school year,

Employee Signature

I will be assigned to _____
School/Department for the 200_ - 200_ school year,

Employee Signature

FAILURE TO RETURN THIS FORM (COMPLETED AND SIGNED) TO THE TRANSPORTATION OFFICE BY THE FIRST DAY OF SCHOOL WILL RESULT IN YOUR NAME BEING REMOVED FROM THE "ARLINGTON ISD ELIGIBLE SUBURBAN DRIVER LIST."