



**BUREAU, HENRY AND STARK COUNTIES  
REGIONAL OFFICE OF EDUCATION  
BUS TRAINING  
REGISTRATION FORM**



BUS DRIVER'S NAME: \_\_\_\_\_ Employer PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ Home Phone: \_\_\_\_\_

CITY & STATE: \_\_\_\_\_ ZIP CODE \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ Start Date: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

EMPLOYER'S ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
CITY ZIP CODE

⇒ **TRANSPORTATION DIRECTORS:** Please return this form at least 1 week  
 ⇒ prior to the course date along with \$10.00 fee payable to the Regional Office  
 of Education for each registrant. For further information, call Kathy at  
 ⇒ (309) 936-7890.

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Refresher Training

Initial Training

Date: \_\_\_\_\_

Location: \_\_\_\_\_

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Regional Office of Education  
 107 South State Street  
 Atkinson, IL 61235  
 (309) 936-7890 Fax: (309) 936-1111