

Complete the following application to register with the SchoolPool program

- All the fields are required to complete registration

Parent Information

Parent Name

(First Name, MI, Last Name)

Phone

(Cell)

(Home)

(Work)

Email

Home Address

Street Address/Apt #

City

State

Zip

Password Information

Please provide a unique password for SchoolPool

(Must be 8 to 12 alphanumeric characters)

Child Information

School District

School Name or Private School Name

School Address

Street Address

City

State

Zip

Distance from Home to School

(Miles)

Childs Grade

Classroom ID or Teacher

Child's First Name

Not shown to others

Current Mode of Travel

Drive Alone

Carpool

Walk

Bike

Travel Preference

Carpool

Walk

Bike

School Schedule

am

pm

Match Preference

Your school only

Nearby schools

Parent Signature

I agree to the Terms of Use and Privacy Policy of Commuter Connections

Yes

No