

_____ City Schools
School Transportation alternative bus stop request form

_____ City schools schedules transportation service for its students in grades Kindergarten through the 8th grade who live more than 1.25 miles from the school they are assigned to. Eligibility for transportation is based on the home address of each child.

We recognize that sometimes families have a need for student transportation to and from an address other than their home address. The district will consider those, but can only honor the requests under the following conditions:

1. The alternate address requested must be eligible for transportation from the child's school.
2. The alternate address must be accessible to a stop that is already scheduled on a bus route to/from the child's school.
3. There must be space available on the bus.
4. The alternate address must be used on a weekly basis. Day to day changes will not be honored for the protection of your child.
5. Requests must be submitted at least 5 days in advance so ensure time to consider the request.

Date of request _____ School : _____

Student name: _____ Grade: _____ If KG: AM__ PM__

Home address: _____

Parent / Guardian name: _____

Home Phone: _____ Cell phone: _____ Work Phone: _____

Email address: _____

Alternate address requested: _____

Name of responsible contact at alt. address: _____

Phone number at alt. address: _____

Dates requested: Starting: _____ Ending: _____

For district/staff use only:

Eligible address Y__ N__ / Nearest existing stop: _____

Bus Number: _____ AM__ PM__ Time: _____ Driver notified: _____

Parent contact made: date _____ time _____ follow-up needed? _____