

SPECIAL TRANSPORTATION REQUEST/DELETE/CHANGE FORM

(Check appropriate box)

New Student

Change of Address

Student Suspension

Returning Student

Change of School

*Midday/Work Release

THE STUDENT LISTED BELOW NEEDS SPECIAL TRANSPORTATION:

Please Print Clearly

Name: _____ ID# _____
(last) (first) (middle)

AM Address _____
(street/route) (city) (zip) (telephone #)

PM Address _____
(street) (city) (zip) (telephone #)

Directions _____

Parent Signature: _____

Emergency Contact _____
(name) (relationship) (telephone #)

Student Data _____
(school) (special program) (grade/age)

Exceptional Classification _____ DOB: _____

Special Conditions (e.g. *harness/seatbelt size, seizures, pickup/drop-off times, etc.) _____

If Transfer Student, indicate school transferring from _____

Requested Date for Transportation to Begin: _____

NOTE: Children under 12 years of age are not released from the bus at home until a responsible adult is available for Supervision. Any deviation from this procedure must be approved by parent/guardian signature below:

I, _____, do do not give permission to release my child, _____
(circle one)

_____, from the bus, unsupervised, at the regular bus stop in the afternoon. I further understand that, when supervision is required, it is my responsibility to provide that supervision, and failure to do so may cause involvement of appropriate law enforcement and/or the Warren County Social Services Department.

Parent/Guardian Signature: _____ Date _____

* A copy of student's I.E.P. must accompany this form indicating Midday/Voc. Program and/or need for restraints (harness/seatbelt) if requesting such services.

Principal/Designee's Signature Date

Exceptional Children Director's Signature Date

TRANSPORTATION OFFICE USE ONLY

Annual Start Date: _____ Pickup Time: _____ Bus Number: _____

Date Notified: Driver _____ Cab Company: _____

Parent _____ Run Number: _____

School _____ Stop Number: _____

NOTE: PLEASE ALLOW THREE (3) WORKING DAYS FOR SPECIAL TRANSPORTATION ARRANGEMENT