ANTHONY WAYNE LOCAL SCHOOLS ALTERNATE TRANSPORTATION REQUEST FORM

This form must be received by the Transportation Department 72 hours in advance of the requested change to be in effect.

Anthony Wayne Local Schools Transportation Department may provide (at the discretion of the Director of Transportation) transportation to an alternate bus stop (other than the assigned stop) for students. Only ONE alternate stop will be considered for each student per semester. The District will not reroute transportation vehicles to establish new stops that are alternates.

An alternate transportation stop request may be approved only if it meets the following criteria:

- 1. the alternate stop will be consistent for at least one semester
- 2. the alternate stop is in the student's home attendance area
- 3. space is available
- 4. the alternate stop is along an existing (current year) route

Requests for alternate transportation stops for children in kindergarten must be for the same morning or afternoon session as the student is scheduled.

Date	SchoolTeacher					
I am requesting that the	e following studer	nt be transported	to/from an alter	nate address:		
Student name				Grade_		
Home address						
Parent/Guardian		Preferred pho	ne	Work phone		
Alternate Residence Na	me					
Alternate Address				Phone		
Days of the week:	□Monday	□Tuesday	□Wednesday	□Thursday	□Friday	
The change is requ	uested for:	□Morning	□Noon	Afternoon		
Dates transportati	ion is request	ed: From_		to		
Parent/guardian signat	ure			Date		
Print parent/guardian r	name					
Principal's signature				Date		

☐ Transportation is	s able to honor t	his request	□Morning	□Noon	□Afternoon	
☐ Transportation is	s NOT able to ho	nor this reques	t			
Director of Transportation			Date			
Copies: \square Driver	Transportation	n 🗖 Pare	nt 🔲 Schoo	ol Office		