

ALTERNATE BUS FORM



ANCHOR BAY SCHOOLS
TRANSPORTATION DEPARTMENT
586-725-4220 Office FAX 586-725-4223

Please fill out this form completely. Failure to do so will delay processing. Complete one form for each different school your children attend. Students may not change bus stops without notification of approval from the Transportation Department. The Transportation Department will notify the parent of the changes within five (5) days.

PLEASE PRINT

DATE: _____ SCHOOL: _____

I hereby request permission and accept responsibility for my/our child(ren) listed below to be granted the following transportation change for pick up and/or drop off.

NAME OF STUDENT(S) _____
If Kindergartner, indicate a.m./p.m. GRADE _____

If Kindergartner indicate a.m./p.m. GRADE _____

NAME OF PARENT/GUARDIAN _____

HOME ADDRESS _____ ZIP _____

PHONE NUMBER WHERE YOU CAN REACHED DURING THE DAY: _____

REQUEST TRANSFER TO: (MUST BE AN EXISTING BUS STOP)

STOP LOCATION: _____

CAREGIVERS NAME: _____ PHONE # _____

CAREGIVERS ADDRESS: _____

PICK UP & DROP OFF _____ PICK UP ONLY _____ DROP OFF ONLY _____

The Transportation Department will use the following rules to base its decision to provide transportation from an alternate address:

- The alternate address must be within the same school's attendance boundary
• The alternate stop must be for all five (5) days a week NO EXCEPTIONS
• The alternate stop must be an existing stop on the bus run.
• The desired alternate bus run cannot be within 10% of load capacity
• If request is for a noontime kindergarten stop, the stop requested must be within the a.m./p.m. attendance area for that school

Approved request will cause your child's assignment to change to the alternate address. If your child should need to change back to the home stop, you must contact the Transportation Department three(3) days prior to riding from the different stop.

***** FOR OFFICE USE ONLY*****

ROUTE: _____ BUS: _____ DRIVER: _____

STOP LOCATION: _____

APPROVED BY: _____ DATE: _____ EFFECTIVE: _____

8/05 REVISED _____ FILE _____ BUS DRIVER _____ SCHOOL _____