



SCHOOL BUS REQUEST

Complete sections 1 and 2 for all requests. Complete sections 3, 4, & 5 if related to your request. The school will forward your request to the Transportation Department upon completion. Transportation will notify the parent(s) when request has been processed. Requests may take up to five working days to complete.

*Stops are not subject to relocation except for safety concerns determined by the Pupil Transportation Department, County Traffic Engineer and /or the County Division of Police.*

1. Check all that apply:  New Student  Change in pick up or drop off location  
 Change of address  Review of current bus stop  
Other: \_\_\_\_\_

2. Student Information :

School: \_\_\_\_\_ Date of Request: \_\_\_\_\_  
Child's Legal Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
Parent/Legal Guardian's full name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone (H): \_\_\_\_\_ (W): \_\_\_\_\_ (C): \_\_\_\_\_

3. Current Bus Information:

Current bus #: \_\_\_\_\_ Stop Location: \_\_\_\_\_

4. Child Care Provider Information:

Provider's Street Address: \_\_\_\_\_  
Check one:  AM  PM  Both

Parent's Signature: \_\_\_\_\_

5. Your Request/Concerns:

Information for Schools: New Student/Change of address: Student information must be entered into SIS prior to sending to transportation for processing. Please fax the forms to 434-(738-0100) or place on the pony to the attention of the Transportation Department. Please do not do both.