

SELECT ONE: ☐ New Rider ☐ Change of address ☐ Restart pick up of student

**Student Bus Transportation  
New Rider/Change Address Form  
(Use separate form for Alternate Caregiver Request)**

**NOTICE:** The school your child attends must be notified of new address. The Department of Transportation will need up to two (2) working days upon receipt of this form in order to coordinate transportation to and from school.

When the bus arrives at the stop in the afternoon, a parent/guardian or authorized individual should be at the bus stop to escort the K4, K5 and 1st grade students whether the student is alone or in a group. An authorized individual who may escort a K4, K5 and 1st grade student should be an adult or student who is 2nd grade or older. One person can serve as an escort for multiple children. If the parent/guardian or authorized individual is not there to escort these students, the student may be returned to his/her school. If the student is returned to school, the parent/guardian will be contacted to pick up his/her child from school. If the parent cannot be reached, the matter may be referred to local authorities. A child returned three (3) times or more may lose bus riding privileges.

Date: \_\_\_\_\_

Rt. #: \_\_\_\_\_ Location of Bus Stop: \_\_\_\_\_

Transportation needed: ☐ AM Bus Stop Time: \_\_\_\_\_ ☐ PM Bus Stop Time: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Student's Home Address: \_\_\_\_\_

Transportation Start Date: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Is change ☐ Permanent ☐ Temporary

If temporary, date(s) to be transported: \_\_\_\_\_

Parent/Guardian Phone #: \_\_\_\_\_ ☐ Parent Notified by School

Parent/Guardian Name (Print): \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_

Principal Approval & Signature: \_\_\_\_\_ Date Approved: \_\_\_\_\_

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**REQUEST FOR ALTERNATE PERSON TO ESCORT K4, K5 and 1<sup>st</sup> GRADE STUDENTS**

I GIVE THE FOLLOWING PERSON(S) PERMISSION TO ESCORT MY K4, K5 and 1<sup>st</sup> GRADE STUDENT FROM THE DESIGNATED BUS STOP:

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

GRADE/AGE OF INDIVIDUAL: \_\_\_\_\_ GRADE/AGE OF INDIVIDUAL: \_\_\_\_\_

RELATIONSHIP TO STUDENT: \_\_\_\_\_ RELATIONSHIP TO STUDENT: \_\_\_\_\_

PHONE #: \_\_\_\_\_ PHONE #: \_\_\_\_\_

Parent/Guardian Name (Print): \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_