

FINDLAY CITY SCHOOLS
GRADES 6 – 12 BUS SERVICE REQUEST FORM
This form is valid only during the 2017-2018 school year.

This form can be used to request bus service for students in grades 6-12 for the following purposes:

- To request bus service for a student residing in the designated walk area of their assigned school.
- To request bus service for a student to accommodate a sitter situation in a designated bus area.
- To request a change in an eligible rider's current bus stop assignment to another already established bus stop.

Requests will be processed and approved based on the following criteria:

1. Students must ride the same bus each morning and board from one designated bus stop.
Students must ride the same bus each afternoon and depart the bus at one designated bus stop.
The morning bus and afternoon bus assignment may be different; but both assignments must remain consistent every day.
2. Requests will be processed in the order received. New stops will not be created. Available seating space and previous access history will be reviewed.
3. Student's behavior must not become a distraction or safety concern for the bus driver. Service will be revoked if concerns develop.
4. Shared parenting arrangements will be recognized per court orders and accommodated when possible.
5. Requested service must conform to the transportation rules established by the State of Ohio.
6. Approved requests are valid for one school year only. Parents who want to participate again the following school year must complete and submit a new form prior to the annual **June 30th deadline**. Please note that priority is given to eligible riders without transportation services from their home neighborhood during the first few months of each school year. As a result, the grade 6-12 request forms may not get processed until October.

PARENT: Please provide the following information.

Today's date _____ Requested start date _____

Student's name _____ School _____

Home address _____ Grade: (Circle One) 6 7 8 9 10 11 12

Parent name _____ Email _____

Home phone _____ Work _____ Cell _____

List any medical or other important information the school bus driver should be aware of regarding the student: _____

Student is currently an eligible bus rider. ___No. ___Yes. Student rides bus # _____ Bus stop _____

List bus stop being requested. Leave blank if unknown. Transportation will review & determine closest stop meeting state safety regulations.

Morning service requested from ___home neighborhood or ___sitter neighborhood. Stop requested: _____

Afternoon service requested to ___home neighborhood or ___sitter neighborhood. Stop requested: _____

Parent's signature _____ **Principal's signature** _____

Complete this section only if student needs to be assigned to a stop from a sitter residence in a designated bus area:

Sitter name _____ Home phone _____ Cell phone _____

Address _____ **Sitter's signature** _____

THE SECTION BELOW WILL BE COMPLETED BY THE TRANSPORTATION OFFICE.

___Access could not be approved. Reason _____

___Access confirmed. **For safety reasons, bus service cannot begin before the designated start date below.**

Date student may begin requested bus service _____

Student assigned to A.M. Bus # _____ Assigned bus stop _____

Student assigned to P.M. Bus # _____ Assigned bus stop _____

Transportation Coordinator's/designee's signature _____ Date _____

___Copy on file in office ___Copy to bus driver & route book updated ___Principal copy emailed ___Parent copy mailed/emailed