HEMPFIELD SCHOOL DISTRICT ALTERNATE CARE Transportation Request

Students may only use the assigned AM and PM stops. Different stop locations may not be used on different days (including early dismissal days or late starts). A student can't be assigned to two AM or two PM stops.

- 1. This form is to be used if alternate busing is needed on a long-term basis (entire year or rest of year). It must be renewed each year!
- 2. This form can be used to request an AM only, a PM only, or both an AM and PM Alternate Care stop.
- 3. <u>There must be room on the bus</u> in order for the request to be considered and approved. Approval must be confirmed <u>before</u> the student can ride.
- 4. Sufficient time is needed for driver Notification and Implementation.
- 5. The requested stop must be an <u>EXISTING</u> stop in your child's School Attendance Area.
- 6. If you are in a <u>Dual Custody</u> situation, **both** parents **MUST** sign this form.

Please complete and return the entire form below.

| Student Name: | | | |
|--|---|--------------------|--|
| School: | Requested Start Date: | | |
| | Signature: | | |
| Home address: | City: | | |
| Parent 1 Email: | Cell Phone: | | |
| | Signature: | | |
| Home address: | City: | | |
| Parent 2 Email: | Cell Phone: | Cell Phone: | |
| | City: | | |
| Responsible Individual: At <u>AM</u> alternate location | Phone #: Cell Phone #: | | |
| | And/or | | |
| Alternate Address <u>PM:</u> | City: | Zip: | |
| Responsible Individual: | Phone #: Cell Phone #: | **** | |
| Reminder: If approved, this will be the Return to: Transportation Office, Hen 200 Church Street, Landisv | e only bus stop for that child for either AM apfield School District | | |

District fills out the below information: Start Date: _____