BUS REQUEST FORM MUST BE COMPLETED YEARLY FOR CURRENT STUDENTS

This form must be completed at the <u>beginning of each school year</u> and returned to the School Office. Requests for <u>new</u> students or <u>address changes</u> will be processed by the Transportation Department and the parent/guardian will be notified of the stop location, bus number, and pick-up and drop-off times. *Per Bridgman's bus transportation policy, <u>all other requests</u> for changes will be processed and a decision will be made in 3-5 days.*

	s riders need to be at t r scheduled pickup time	heir bus stop five minutes prior t e.	o their bus pickup time	and remain	at the bus stop at least	
New Student	Address Change	Other (explain)				
Tadada Data		0-	ta(a) Chanasa Nasadada			
			te(s) Change Needed: _			
Student's Name:		School:		_ Grade or Teacher:		
				Grade or Teacher:		
Old Address:		New Address:				
Parent/Guardian	Name:	Contac	t Phone Number:			
Day		A.M. Student Address			Bus # Completed by Transportation	
Mon						
Tues						
Wed						
Thurs						
Fri						
<u>'</u>				'		
Day		P.M. Student Address			Bus # Completed by Transportation	
Mon					·	
Tues						
Wed						
Thurs						
Fri						
Bridgman Elen	nentary School Stu	dents only				
Day				Vill this student be Walking		
		(Name of Driver)		To a	nd From School?	
Mon				<u> </u>	Yes No	
Tues Wed					Yes No	
Thurs				<u> </u>	Yes No	
Fri					Yes No	