

SCHOOL USE COURTESY SEAT REQUEST FORM

TO BE COMPLETED BY PARENT/GUARDIAN AND RETURNED TO THE SCHOOL FOR PROCESSING

USE THIS FORM FOR REQUESTS RECEIVED BETWEEN OCTOBER 1 THROUGH JUNE 30 FOR THE CURRENT SCHOOL YEAR

Where bus routes have been established and there is available space on a bus, students who are not eligible for transportation, may apply for permission to ride the bus.

School Name:						
Courtesy Transportation is subject to the following conditions: From the first day of school to the end of September, only eligible students will be permitted to ride. The School Principal has confirmed the route(s) have an available seat and supports the request. Students receiving approval must access the bus at an existing bus stop location. No route changes will be made and NO NEW STOPS WILL BE ADDED. Permission to ride the bus may be withdrawn at ANY time if the seat is required by an eligible rider. Riding privileges will be withdrawn for the remainder of the school year for acts of misconduct. The applications and approvals are for the current school year only. No additional cost will be incurred by the Board. For this purpose only, acceptable loads on a bus rated at 72 passengers will be: JK to Grade 8 - 55 students (maximum) Grade 9 to 12 - 42 students (maximum)						
PARENT/GUARDIAN						
If the closest stop is outside of my community, I am willing to drive to/from an existing bus stop outside of my community YES \(\sqrt{NO} \sqrt{\sqrt{NO}} \sqrt{\sqrt{NO}} \sqrt{\sqrt{NO}}						
Student Name(s) – please print				Grade	Parent/Guardian Contact Number(s):	Priority Level
			0.340	Home:		
					Work:	
					Cell:	
Requested Transportation Address (REQUIRED for assignment to bus stop):				Parent/Guardian Email:		
I understand and agree to the conditions for Courtesy Transportation and understand I am solely responsible for my child's safety and conduct to/from and at the bus stop. In addition, I understand the school Principal or Halton Student Transportation Services has the right to remove my child from courtesy transportation upon 24 hours' notice. Should this occur, I will assume all responsibility to ensure my child's safe arrival and departure to/from school.						
PARENT/GUARDIAN SIGNATURE DATE						
SCHOOL USE ONLY						
	Route Number	Student Count	Stop Locati	on		
Morning (AM):						
Afternoon (PM):						
Student Count Date:				Start Date:		
I have confirmed there is seat availability on the requested vehicle(s) and request Halton Student Transportation assign the student(s) accordingly. PRINCIPAL/DESIGNATE SIGNATURE DATE						