

Request for Change to School Transportation Arrangements 2016-17 School Year
(Student Pick-up & Drop-Off)

Date of Request: _____

Name of Parent/Guardian making request: _____

Email: _____ Phone: _____

Name of Student (one student per request): _____

Student's School: _____ Grade: _____

Please clearly designate your student's pick-up and drop off location arrangements which will occur on a **permanent weekly basis**. Permitted pick-up & drop-off locations include: home, the YMCA Hopkins/Elmwood before & after school childcare program, a licensed childcare provider who has a busing contract with HPS, a familial sitter location, or you can designate "parent transport" if you are transporting your child to/from school.

I request to change my student's pick-up & drop-off arrangements to the following:

Bus childcare pick-up location/or parent transport:

Bus childcare drop-off location/or parent transport:

Monday: _____

Monday: _____

Tuesday: _____

Tuesdays: _____

Wednesday: _____

Wednesday: _____

Thursday: _____

Thursday: _____

Friday: _____

Friday: _____

Childcare Provider: _____ Phone # _____

Address: _____

Childcare Provider: _____ Phone # _____

Address: _____

Sitter: _____ Phone # _____

Address: _____

For Sitter: Designate family relationship _____

Sitter locations must be registered with the HPS Transportation Department and approved. Registration forms can be found on the HPS district website under Transportation.

Requested Effective Date of Change: _____

Parent/Guardian Signature: _____ Date: _____

For School Use Only

Date Received by School: _____

Recommended Action by School Principal: _____

Approved Denied Reason For Denial: _____

Principal's Signature & Date: _____

Date Parent Notified of Decision: _____ Method of Notification: _____

Submit this form to your student's school.