

Howard-Suamico School District

Special Request For Transportation Change

*Note: Unless an emergency, this form should be filed with Lamers Bus Company, 1934 Cardinal Lane, Green Bay, WI 54313, at least 10 days before effective date of request.
Phone 920-434-5100, Fax 920-434-5200*

Parent's Name _____ Address _____

Telephone Number _____ Home Attendance Area: _____

<u>Student Name</u>	<u>School Attending</u>	<u>Grade</u>	<u>Teacher</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Present Pick-up Point: _____ Bus No. _____

Present Drop-off Point: _____ Bus No. _____

Request Pick-up Point: _____

Request Drop-off Point: _____

Effective Date: _____ Duration of Request: _____

Sitter/emergency contact: _____ Phone number: _____

Reason for Request: _____

I understand that this request, if approved, is for the current school year only. Changes in pick-up and drop-off location in future school years must be requested by completing this form each year. I also acknowledge that this is a variance from the normal transportation route instructions, and waives any claims and holds the Howard-Suamico School District and Lamers Bus Company harmless from any liability or damages which might arise as a direct or indirect result of the requested transportation change.

Signature of Parent/Guardian _____ Date _____

Lamers Bus Review

Recommend Approval _____ Recommend Disapproval _____

Reason for Disapproval _____

Signature of Lamers Bus Official: _____ Date _____

School District Review

Open Enrollment Coordinator Approval: _____ Disapproval: _____ D/N/A: _____ By: _____

Elementary Attendance Area Transfer by Approval: _____ Disapproval: _____ D/N/A: _____ By: _____

Assistant Superintendent of Business Services Approval: _____ Disapproval: _____ Date: _____

Reason for Disapproval _____
