

All-Star Transportation/Wolcott Public Schools

Transportation Information

Dear Parents and Guardians,

The following form is to be completed if you would like to request an alternate stop, transportation to childcare, or request a change to your primary stop location.

The form is designed to gather information as it relates to school bus transportation for the school year. This form must be filled out **every year**, even if your *childcare* arrangements will remain the same.

Approvals will be given provided seats are available on the bus route involved. Please keep in mind that ... **CHANGES TO SCHOOL BUS TRANSPORTATION CANNOT OCCUR OUTSIDE OF YOUR ELEMENTARY SCHOOL DISTRICT.**

This form should be completed and returned to your child's school, at your earliest convenience. If you have any questions concerning this form, please feel free to contact our office!

Ph. - 203-879-1334

brenda.johnson@all-startransportation.com

Please keep a copy for your records!

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Transportation Information

PLEASE SUBMIT TO YOUR CHILD'S SCHOOL

Please complete this form if you would like your child to go to any address *other* than your home address.

School Name: _____

Student's Name: _____ Grade: _____

Home Address: _____

Parent/Guardian Name: _____

Home Phone: () _____ Cell Phone: () _____

Work Phone: () _____

MORNING BUS

Please pick-up my child/children at the following location (Mon – Fri):

Address: _____

Phone: () _____

AFTERNOON BUS

Please drop-off my child/children at the following location (Mon – Fri):

Address: _____

Phone: () _____



Wolcott Public Schools Bus Drop-Off Waiver

2018-19

Please be advised that my child has my permission to be dropped off by the school bus at his/her regular bus stop without a parent, known adult or older sibling present to meet him/her.

Please note that this waiver is for students in grades 1– 4. NO Kindergarten student will be allowed to disembark without an adult present.

Child's name (please print clearly): _____

School: _____

Grade: _____

Teacher: _____

Bus No.: _____

This waiver is valid until the end of the 2018–19 school year or until rescinded in writing by the parent.

Parent Signature

Date

RETURN TO YOUR CHILD'S SCHOOL OFFICE