PERMISSION TO RIDE A BUS

Date:	School:	Grade:_	
Student Name:_			
Student has per	mission to ride Bus#	on	_(date)
(Please check or	ne of the following reasons)		
	ding home with another stu		
	ding to a relative's house Jame:		
Student will Address:	be a new rider.		
(All new stops will h	ave to be approved with the Transp	portation Department)	
Student is us	sually a car rider		
Other			
(Students will only b	e dropped off at bus stops that are	already approved)	
Parent Signatur	re:	Date:	
	ncinal Office Staff)	Date:	

^{*}Bus driver must receive a copy of this permission slip before student can be dropped off at a different stop. If student does not have a signed permission slip he wil be taken to his designated stop or back to the school.