

**BUS PASS REQUEST**

**Student Requesting Pass:**

Last Name: \_\_\_\_\_ first name: \_\_\_\_\_

Student #: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ (Please print legibly)

Parent's Phone: \_\_\_\_\_

**Student Requesting to Ride Home with:**

Name & Student # of the student that you will be riding home with:

(Last, First): \_\_\_\_\_ Student #: \_\_\_\_\_

Parent Phone # for student that you will be riding home with: \_\_\_\_\_

Bus # that you are requesting to ride: \_\_\_\_\_

Address that you are requesting bus pass for:

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date to begin bus pass: \_\_\_\_\_ Date to end bus pass: \_\_\_\_\_

*Bus passes are only valid for up to 10 consecutive school days*

**Reason you are requesting to ride another bus:**

*Please note that bus passes will only be granted for emergency situations and in instances of joint custody.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent signature: \_\_\_\_\_

Date: \_\_\_\_\_

***Bus Pass requests must be received before 1:12 PM in order to be granted on that day.  
Passes cannot be granted without both a student and parent signature.***