



Transportation Department

616 Preston Drive

Kingwood, WV 26537

Phone: (304) 329-2524 Fax: (304) 329-3696

REQUEST FOR ALTERNATE BUS ASSIGNMENT

(Only use this form in the event of an alternate location. One alternate location is permissible.)

Fillable form on website can be saved and emailed to tony.harris@k12.wv.us or be given to school secretary.

_____ *Date*

I am requesting permission for my son/daughter, _____ *Name of Student*

to ride bus # _____ to _____ *(Address)*

from _____ school. My child will be received

by _____, phone # _____, who *Name of Care Giver*

will accept responsibility for his/her care at that time.

This request remains in effect from _____ to _____ *Date Date*

This request is necessary due to: _____ (please circle dates and/or times)

Monday Tuesday Wednesday Thursday Friday

AM/PM AM/PM AM/PM AM/PM AM/PM

During the time of transport I may be reached at _____, _____ *Location Phone*

Parent Signature

Home Phone

Approved _____ Denied _____

Transportation Director Effective July 2017