



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 splum@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
Steve Plum

Effective July 2017
Updated 3/1/21