
**ALTERNATE TRANSPORTATION REQUEST FORM FOR DUAL
RESIDENCE STUDENTS SUBJECT TO COURT-ORDERED JOINT
CUSTODY ARRANGEMENT :**

Date of Request: _____

Student Name: _____

.....
Parent 1:

Print Name: _____

Home Address: _____

Home Phone: _____

Relationship: _____
.....

Parent 2:

Print Name: _____

Home Address: _____

Home Phone: _____

Relationship: _____
.....

I have read the bussing schedule attached to this form and agree to this schedule and will abide by all provisions of this alternate transportation request. I also certify that the court order provided herewith, pertaining to the divorce and child custody issues, is the most recent court order. I understand that the bussing schedule is in effect for the entire school year. I understand that it may take as many as five (5) business days to implement this request.

Parent 1 Signature: _____ Date: _____

Parent 2 Signature: _____ Date: _____