



CANTON 22-23 TRANSPORTATION REQUEST FORM

College Preparatory School

Please complete this form to request yellow bus transportation. If you move during the School Year, a new Transportation Request Form must be completed. Please allow five (5) Business Days for processing.

Date of Request: _____

Purpose of Request:

- Returning Student/Same Address
- New Student/Address Change [POR Required]
- Network Transfer From School: _____ to School: _____
- Other (state purpose): _____

Service Type:

- Both to and from school
- AM only to school – will pick up in PM
- PM only from school – will drop off in AM

Parent/Guardian Name: _____

Home Address: _____ Home Phone: _____

City/State/Zip: _____ Emergency Phone: _____

<u>Student Name</u>	<u>Date of Birth</u>	<u>Gender</u>	<u>22-23 Grade</u>
1. _____	_____	M F	_____
2. _____	_____	M F	_____
3. _____	_____	M F	_____
4. _____	_____	M F	_____
5. _____	_____	M F	_____

COMPLETING THIS FORM DOES NOT GUARANTEE TRANSPORTATION

THIS SECTION TO BE COMPLETED BY TRANSPORTATION DEPARTMENT

Date Reviewed: _____ Date Completed: _____ PowerSchool Updated: _____

Request Status: Approved Declined Waitlist SSID: _____

Bus Information: Route: _____ Stop: _____ Start Date: _____

Denial Reason: Live within 1 mile or greater than 5 miles of school Bus stop unavailable

Other: _____