APPLICATION FOR SCHOOL BUS TRANSPORTATION

Under authority of Chapter 285 of the Code of Iowa, the Waterloo Community School District will provide transportation, or reimburse parents for all high school students residing more than three (3) miles from their designated high school; all intermediate students residing more than two (2) miles from their designated attendance center; and all elementary students who live more than one (1) mile from their assigned attendance center.

Students who live less than the above stated guidelines may ride a school bus, providing seats are available on a regularly scheduled stop on a regularly scheduled route. Applications will be available beginning July 1st of the current school year and approved in the order they are received by Durham School Services.

Discretionary transportation will not be available for at least the first 10 days of school. During the school year, any request for transportation on a discretionary basis will require a minimum of 3 days for processing. This will provide time for the Transportation Department to determine availability of space on existing bus routes.

Please fill out the following information and send this form back to Durham School Services, 1601 Black Hawk Street, Waterloo, IA 50702 or fax to 226-9807. Durham will in turn make the appropriate arrangements and notify you after Labor Day of the current school year. If you have any questions please feel to call the Transportation Department at 291-4879.

TODAY’S DATE: ____________________________

PARENT / GUARDIAN NAME: ________________________________________________

ADDRESS: ______________________________________________________________

PHONE: (Home) ____________________ (Work or Cell) __________________________

STUDENT NAME: ____________________ GRADE ________ SEX  □ Male  □ Female

SCHOOL OF ATTENDANCE (transport to/from school) __________________________

□ To School  □ From School  □ BOTH

Transportation Department Use ONLY

Date Received: ____________________

Request Denied (Reason) ___________________________________________ Staff Initials ______

Request Approved  □ A.M. Route # _____ A.M. Stop __________________________ A.M. Time ______

Request Approved  □ P.M. Route # _____ P.M. Stop __________________________ P.M. Time ______

Date to Begin Transportation ________ Date to Stop Transportation _________

Date Parent Notified _____________________________