



# Discretionary Transportation Application

RETURN COMPLETED FORM TO

First Student, Transportation Department

1601 Black Hawk Street, Waterloo, IA 50702 ♦ 319.291.4879



[transportation@waterlooschools.org](mailto:transportation@waterlooschools.org)

## 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 1<sup>st</sup> of the current school year and approved in the order they are received by First Student. **Students on a Voluntary Transfer do not have the option to apply or receive a discretionary route/stop. Your application will automatically be denied.**

**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 First Student, 1601 Black Hawk Street, Waterloo, IA 50702, or [transportation@waterlooschools.org](mailto:transportation@waterlooschools.org). First Student 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 free to call First Student at 291-4879.

TODAYS DATE \_\_\_\_\_

PARENT / GUARDIAN NAME: \_\_\_\_\_

PHONE:(Home)\_\_\_\_\_ (Work or Cell) \_\_\_\_\_

EMAIL:\_\_\_\_\_

STUDENT NAME: \_\_\_\_\_ GRADE \_\_\_\_\_ SEX  Male  Female

SCHOOL OF ATTENDANCE (transport to/from school) \_\_\_\_\_

ADDRESS:\_\_\_\_\_

STUDENT NAME: \_\_\_\_\_ GRADE \_\_\_\_\_ SEX  Male  Female

SCHOOL OF ATTENDANCE (transport to/from school) \_\_\_\_\_

To School  From School  BOTH

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### 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 \_\_\_\_\_