



Alternative Bus Service Request Form

Wisconsin Rapids Public Schools Board policy states that, "Students will ride on assigned buses. Parents must request, in writing, an exception to this rule. Requests shall be made to the designated staff person. Students will board and disembark from their assigned bus as designated unless written permission from the designated staff person at the school is granted to be let off at other than the regular stop. Parents will assume the responsibility of the child when such a request is made and granted."

Please be aware that transportation to/from a childcare provider **may** be available for students who are eligible for busing **if** the childcare provider is located within their school attendance area, **and** the provider's address is within a current bus route for that school, **and** there is space available on the bus.

If approved, daily busing will be to/from the alternate address in lieu of your home address, no exceptions.

Complete and return this form to: Paula Tesch (District Office) paula.tesch@wrps.net
510 Peach Street, Wis. Rapids, WI 54494

NOTE: Your request may take 48 - 72 hours (about 3 days) to process.

Please list the names of any child in your household who will use this Alternative Bus Request:			
Name:	School:	Grade:	
Name:	School:	Grade:	
Name:	School:	Grade:	
Name:	School:	Grade:	
Parent's/Guardian's Name:			
Home Address:			
Home Phone:	Work Phone:	Cell Phone:	Regular Assigned Bus Number (if known):
Alternative address at which your student(s) should be dropped off and/or picked up? ONLY ONE ALTERNATE PER FAMILY			
Please provide the name, phone number, and relationship to your student(s) of the responsible adult at this alternative address:			
Are you requesting alternate busing: <input type="checkbox"/> Before school only <input type="checkbox"/> After school only <input type="checkbox"/> Both before and after school			
What date is this change to begin, or what alternative dates is this change being requested for:			
Parent/Guardian Signature: _____ Date: _____			
For Office Use Only			
<input type="radio"/> Request APPROVED <input type="radio"/> Request DENIED Transportation Director/Designee Signature: _____			