

**PERRY TOWNSHIP SCHOOLS**  
**ALTERNATE BUS WAIVER REQUEST FORM**

STUDENT NAME: \_\_\_\_\_ STUDENT ID#: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ PHONE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

SCHOOL ATTENDING: \_\_\_\_\_ GRADE: \_\_\_\_\_

REQUESTED ADDRESS: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

A.M. ONLY      P.M. ONLY      BOTH A.M. AND P.M.  
 (MUST CHOOSE AND CIRCLE ONE OF THE ABOVE)

REASON FOR REQUESTING ALTERNATE BUS STOP LOCATION? \_\_\_\_\_

**STUDENT'S CURRENT BUS STOP**

A.M. BUS STOP LOCATION: \_\_\_\_\_ BUS #: \_\_\_\_\_

P.M. BUS STOP LOCATION: \_\_\_\_\_ BUS #: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE : \_\_\_\_\_

**WAIVER REQUESTS COULD BE DENIED IF MISSING COMPLETE INFO.**

WAIVER APPROVED:

YES

NO

WAIVER START DATE:

ADDITIONAL COMMENTS FOR THE DRIVER:

NEW BUS STOP INFORMATION		
APROX. TIME	BUS STOP LOCATION	BUS
AM:		BUS # :
PM:		BUS # :

Kdg. Year Only: \_\_\_\_/\_\_\_\_

5th Gr. \_\_\_\_/\_\_\_\_ Final Elem. Year

1st Gr. \_\_\_\_/\_\_\_\_

2nd Gr. \_\_\_\_/\_\_\_\_

3rd Gr. \_\_\_\_/\_\_\_\_

4th Gr. \_\_\_\_/\_\_\_\_

**IMPORTANT INFORMATION REGARDING WAIVER REQUESTS**

**COMPLETED WAIVERS** SUBMIT THESE FORMS DIRECTLY TO THE SCHOOL THAT YOUR CHILDS ATTENDS.  
**ELEMENTARY SCHOOLS (GR. 1-5)** APPROVED WAIVERS WILL REMAIN ACTIVE UNTIL THEY MOVE TO GR. 6.  
**KINDERGARTEN AND SECONDARY SCHOOLS (GR. 6-12)** WAIVERS ARE SUBMITTED EACH SCHOOL YEAR.  
**AFTER WAIVERS ARE PROCESSED** YOU WILL BE NOTIFIED BY A STAFF MEMBER FROM YOUR CHILD'S SCHOOL.