



Howland Local Schools

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STUDENT TRANSPORTATION CHANGE REQUEST FORM

GRADES KG – 5 REQUESTS CANNOT CHANGE BUILDING DESIGNATED BY HOME ADDRESS

Children are bused to and from their home address, however this **long-term** request form is provided for parents to complete should the student(s) need busing to/from an alternate address. Requests are for the **current** school year only. Should you need an adjustment during the school year to a pick up and/or drop off site a new request must be completed.

This is a request application only and approval will rely on seat availability. You will be notified by phone if your request application has been approved and the date the alternate address busing will start.

***PROOF OF CURRENT RESIDENCY MUST BE ATTACHED**

Student Name _____ Grade _____ Building _____

Student Name _____ Grade _____ Building _____

Student Name _____ Grade _____ Building _____

Student Name _____ Grade _____ Building _____

Current Address: _____

** Proof of current residency for this address must be attached*

Requested Address _____

Reason for Change _____

Phones: _____ home _____ work _____ cell _____

Glen and Mines Day Care Providers

Springs and North Road Providers

Believers Day Care	AM	PM		Child Bright (Little Lambs)	AM	PM
Children's Activity Center	AM	PM		Hope Children's Academy	AM	PM
Howland UMC Preschool	AM	PM		Wee Care Day Care and Preschool	AM	PM
Kiddie Daycare	AM	PM		Noah's Ark	AM	PM
Kids Garden Daycare	AM	PM		Sense of Wonder	AM	PM
Sense of Wonder	AM	PM		Little Soldiers	AM	PM
Little Soldiers	AM	PM		OTHER:	AM	PM
OTHER:	AM	PM		OTHER:	AM	PM

Parent Signature

Date

PARENT PLEASE NOTE: If you are using a Day Care Center for pick up and/or drop off, by signing this form you are giving us permission to check on your address through the Day Care Provider.

Signature of Alternate Day Care Provider (in home setting)

Date

OR

Day Care Owner/Operator Signature

Date

DAY CARE PROVIDERS PLEASE NOTE: If you are a Day Care Provider by signing this form you agree to provide the current address to Howland Local Schools for the above named student.

Office Use Only:

Bus # _____ Effective Date of Change _____ AM _____ PM _____ BOTH _____