

# STOP CHANGE REQUEST

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*\*School Board policy EEAB-AR states in part "The board does not feel it unjust to require that a child walk one mile in order to meet a bus, except for safety reasons. Actual routes and bus stops will be determined by the district superintendent. Under ordinary circumstances, the routes will not be altered in order to relieve such situation when the change would lengthen the run in terms of miles or time. The transportation supervisor shall use the following formula to determine maximum walking distance: the student shall walk whichever is shorter – distance to school or distance to an established bus stop*

Student(s) name \_\_\_\_\_

Parent(s) name \_\_\_\_\_

Home address \_\_\_\_\_

Phone # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Current stop location \_\_\_\_\_

Requested stop location \_\_\_\_\_

Use bus daily (3 days or more weekly) \_\_\_ Yes \_\_\_ No                      \_\_\_ Am \_\_\_ Pm

Reason for stop change request

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Completion of this form does not guarantee approval

For office use only		
Date received _____	Approved _____	Denied _____
By _____		Date _____
Notes		
_____		
_____		
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