Policy 552, Appendix A

2026-2027

Anglophone East School District

REQUEST FOR STUDENT CONVEYANCE TO AN ALTERNATE LOCATION FOR CHILDCARE
CURRENT BUSING STUDENTS ONLY
(Do not use for students attending out of boundary schools)

Parents/Guardians may request to have their child/children delivered to an alternative address. Students **MAY** be permitted to travel to an altemative address subject to the following conditions:

- If the service requested occurs on a consistent basis (i.e. every day to same location)
- If the request can be accommodated on an **existing route and stop**
- If the bus can accommodate extra passengers.

Student: _____ _____
Last Name First Name

Parent/Guardian: _____ _____
Last Name First Name

Civic Address: _____ **City:** _____ **Postal Code:** _____

Telephone Number: _____(Home) _____ (Work) _____(Cell)

School: _____ **Current School Year:** _____ **Grade:** _____

Bus Number: _____AM _____PM

ALTERNATE CONVEYANCE REQUEST

Civic Address: _____ **City:** _____ **Postal Code:** _____

Effective Date: From: _____ To: _____

Please verify: ☐ Pick-up (am) ☐ Drop-off (pm) ☐ Both ☐ Shared Custody

Parent/Guardian Signature: _____ **Date:** _____

Principal or Designate Signature: _____ **Date:** _____

DISTRICT OFFICE USE ONLY

Approved ☐ **Denied** ☐ **If denied, reason:** _____

New Bus Number: _____ **(AM)** **Pick Up Location:** _____ **Time:** _____

New Bus Number: _____ **(PM)** **Drop Off Location:** _____ **Time:** _____