

Perquimans County Schools

Transportation Department

139 Jimmy Hunter Drive, PO Box 337
Hertford, NC 27944



For School Use Only:

Teacher: _____

Terry Sawyer, Transportation Director

(252) 426-7515 Phone; (252) 426-7212 Fax

Parent Application for Alternate Transportation

I am requesting extra transportation for my child to ride to an alternate Perquimans County School's bus stop. I understand my request must meet the guidelines as described in Perquimans County School's Board of Education Policy 6321A.

Student/Parent Information

All requests must be submitted by 10:00 am Monday in order to be processed for the week

Student's Name: _____

School (check one): PCS HGS PCMS PCHS Grade: _____ Regular Bus Number: _____

Current Bus Stop Address: _____

Parent/Guardian Name: _____

Parent/Guardian Phone: _____ Parent/Guardian Emergency Phone: _____

Transportation Change Information

Address for Alternate/New Transportation: _____

Is this a **Permanent** or **Temporary** Change? Permanent Change Temporary Change

Alternate Transportation needed: Both AM & PM Date(s) Needed: _____

AM Only Date(s) Needed: _____

PM Only Date(s) Needed: _____

Person Responsible at Alternate Transportation Address: _____

Telephone Number: _____

Reason for Alternate Transportation request: _____

By my signature, I understand and agree to the conditions of approval for Alternate Transportation.

Parent/Guardian Signature: _____ Date: _____

Principal or Designee Signature: _____ Date: _____

The School will forward a copy of the Alternate Transportation Request form signed by Parent/Guardian and School Principal/Designee to the Transportation Department. Incomplete forms will not be processed and will be returned to the originating school. Once completed, a copy will be returned to the student's school.

ALTERNATE TRANSPORTATION WILL NOT BEGIN UNTIL APPROVED FORM IS RECEIVED FROM THE TRANSPORTATION DEPARTMENT.

For Transportation office use only:

Approved Denied Date: _____

Bus Number Serving New Transportation Address:

Note: _____

Transportation Director/Designee: _____