

It is the goal of St. Maries Joint School District No. 41 to support student/family needs, while strictly maintaining high standards for efficient operation and most importantly, student safety.

Some parents/families have indicated that they need to have their student either picked up or dropped off at two (2) different addresses. To maximize safety for students as well as the efficient operation and management of the District's student transportation system, the following policy/procedures will be consistently implemented.

1. Normally, students who participate in the student transportation system will be picked up and dropped off at the same address.
2. To support students and family needs, two (2) addresses will be allowed.
3. Parents/Guardians must complete and file a "Request for Two Address Busing" form in the school office. A copy of the form will be forwarded to the Transportation Department.
4. Students will be transported according to the special written instructions from parents/guardians on the "Request for Two Address Busing" form.
5. If it becomes necessary to change the pick up or drop off address, the parents/guardians must file an amendment in writing to the principal. It will be the principal's responsibility to acknowledge that the request has been submitted and inform the Transportation Department of the amendment.

Policy Cross Reference:

Legal Reference:

Policy History:

Adopted: 08/29/2000
Reviewed: 08/04/2008

Request for Two Address Busing

St. Maries Joint School District No. 41 - Transportation Department
205 North 15th Street – St. Maries, ID 83861
208-245-3366

Note: In accordance with Policy 702.12, to support student/family needs, one (1) second busing address other than the student’s home stop will be allowed by the District. It is intended to be used consistently as requested on this form. For all other special busing requests, i.e. family emergencies, please contact the student’s school office and request an emergency, one-time busing waiver.

Student’s Name (Print): _____ Parent/Guardian: (Print) _____

TWO ADDRESS FORM REQUIRED FOR EACH STUDENT

Student’s Home Address _____
MUST BE A PHYSICAL ADDRESS – NOT A POST OFFICE BOX OR HCO

Grade _____ School _____ Teacher _____

Home Phone _____ Work Phone _____ Cell Phone _____

START DATE _____ **TERMINATION DATE** _____

I am registering my student to be transported to and/or from the following address which is **different** from my student’s home address:

Second Address _____
MUST BE A PHYSICAL ADDRESS – NOT A POST OFFICE BOX OR HCO

Second Address Location _____
(Please describe location of second address, i.e. highway, mile marker, street intersection, landmark, area, town)

Name of person(s) responsible for my student _____ Phone _____

This second address is necessary for Child Care After School Work Other (Explain) _____

My student is to be consistently picked up at the above address on: (Please Circle Days) M T W TH F

My student is to be consistently discharged at the above address on: (Please Circle Days) M T W TH F

In accordance with Policy 702.12, I understand that these instructions will be used consistently, as stated above, unless another signed request is submitted to the building principal for changes, which will supersede this request.

Parent/Guardian Signature

Date

OFFICE USE ONLY

Home Bus Route _____ Bus _____ Before-School Bus Route _____ Bus _____ After School Bus Route _____ Bus _____

Two Address Roster Home Route Second Address Route Copy to Bus Driver(s) Bus Stop _____