



LITTLESTOWN AREA SCHOOL DISTRICT

**Request for Transportation or Change
One Form for Each Student Needs Submitted**

The Transportation Department **MUST** be in receipt of your request at **least 3 days** prior to the start date.

Effective Date of Change Requested			Circle below		OFFICE USE ONLY	
Month	Date	Year	New	Change	SAPH <input type="checkbox"/> SCHOOL <input type="checkbox"/>	PARENT <input type="checkbox"/> DRIVER <input type="checkbox"/>
					BUS # _____	AM TIME _____ PM TIME _____
					Student ID# _____	Effective Date _____

Student Name: _____

D.O.B. _____ M ___ F ___ Current Grade: _____ School: _____

Parent/Guardian Name: _____ Home Phone: _____

Home Address: _____ City: _____ Zip: _____

E-Mail Address _____ Cell Phone: _____

If your child will be transported to or from a sitter, the information below is required:

Sitter Name: _____ Sitter Phone Number: _____

Sitter Address: _____ City: _____ Zip: _____

AM ___ from the school board approved bus stop closest: from my home or from the sitter (check one) M ___ T ___ W ___ T ___ F ___

PM ___ to the closest board approved bus stop closest: to my home or to the sitter (check one) M ___ T ___ W ___ T ___ F ___

Walking Group Assignment _____ M ___ T ___ W ___ T ___ F ___

Car Rider _____ M ___ T ___ W ___ T ___ F ___

YMCA – AM _____ M ___ T ___ W ___ T ___ F ___

YMCA – PM _____ M ___ T ___ W ___ T ___ F ___

Littlestown Area School District Board Polity Guidelines dictate that schedules must be consistent for the week. No seats will be held for any students, particularly for van riders, that are inconsistent occasional riders. Students may not ride a bus other than the one to which they are assigned unless it is a true emergency, and then by administration discretion only. Bus drivers **ARE NOT** allowed to accept notes. Changes are limited to 3 times per school year. All route times are subject to change.

Non-residents will not be transported in Littlestown Area School District vehicles at any time

Signature of Parent/Guardian

Relation to Student

Date of Request

Please e-mail completed form to LASDtransportation@lasd.k12.pa.us or Fax 717.359.9486

Kindergarten students **MUST** be received at the bus stop.