

**FLEXIBLE TRANSPORTATION FORM
(K-6 Only)**

- *Must be 5 days a week same Pick Up/same Drop Off Place*
- *Should changes occur, parent must resubmit a new form*
- *To qualify for flexible transportation, a work related written statement must be provided by parent employer*
- *All application procedures must be obtained and approved by district Transportation Supervisor*
- *Must transport in same attendance area and on an existing bus route*

Student's Name: _____ School of Attendance: _____

Address: _____

Parent's Name: _____ Phone Number: _____

Reason: _____

AM Pick Up Address: _____

PM Drop Off Address: _____

Parent's Signature: _____

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