

Transportation Services 2445 LaPorte Avenue Fort Collins, CO 80521 970-490-3232 970-490-3522 Fax

2019 – 2020 School Year Alternative Transportation Application

For students attending neighborhood schools

Transportation Services may offer alternative transportation services to students who have special situations including daycare, split families, and transportation to/from locations other than home. *Please read the information below, carefully.*

Application Process and Timeline

- All requests are processed first-come, first-served and are based on the space available on existing routes. (Note: Students will only be assigned to existing bus stops and routes; buses will not be rerouted to accommodate requests.)
- Transportation Services will accept applications beginning June 1, 2019, for the 2019–2020 school year.
- Submit a separate application for each student. Remember to sign and date the application as unsigned applications cannot be accepted. Return completed application to:

Transportation Services Poudre School District 2445 LaPorte Avenue, Building L Fort Collins, CO 80521 -oremail: busrequest@psdschools.org

- Transportation Services will review applications beginning August 1, 2019, in the order they are received. Once the application has been reviewed, the parent will be contacted at the phone number provided below. Staff members appreciate your patience as there are many applications to process, and they process them as quickly as possible.
- State law does not allow students to ride a bus until their application is approved and the student is assigned to a specific bus route.
- Transportation Services cannot assign students to a bus that would exceed bus capacity. Poudre School District bases bus capacity on age group and size of bus.
- The Alternative Transportation Application is good for one school year. Parents must submit a new application each year.

Bus Stop/Route Request

Indicate days of the week and location(s) for which you are requesting bus service. (Note: Students will only be assigned to existing bus stops and routes; buses will not be re-routed to accommodate requests.) * *indicates required field*

Location 1:*	Location 2:				
(Home, daycare, 2nd parent, etc.)					
Address:*		Address:			
City, State, Zip:*	City	, State, Zip:			
Days: 🗌 Monday-Friday: 🗌 am 🗌 pm	Day	s: 🗌 Monday–Friday:	am	🗌 pm	
☐ Monday: ☐ am ☐ pm		Monday:	am	🗆 pm	
□ Tuesday: □ am □ pm		Tuesday:	am	🗌 pm	
□ Wednesday: □ am □ pm		Wednesday:	am	🗌 pm	
□ Thursday: □ am □ pm		Thursday:	am	🗌 pm	
☐ Friday: ☐ am ☐ pm		Friday:	am	🗌 pm	
Student Information					
Complete the information below. Be sure to real	d carefully before signing.				
Student name:*	_ Student ID#:*	School:*			Grade:*
Home address:*	City:*	St	ate:*	Zip:*	

Parent/guardian understand that it is my responsibility to transport _____

Please type Parent/Guardian first and last name

Date

Video/audio cameras on buses are used to help ensure student safety!

* to and

"By checking this box, I understand that the above text constitutes my signature. revised 5/16/19