Chippewa Valley Schools

Pupil Transportation Department

19120 Cass Ave.
Clinton Twp., MI 48038
(586) 723-2160 - FAX (586) 723-2161
E-mail: transportation1@cvs.k12.mi.us

ALTERNATE BUS STOP ASSIGNMENT REQUEST

Our automated Bus Routing Software assigns students to bus stops based on their school of attendance, grade and home address. Students will be assigned to the nearest grade appropriate bus stop to their home that they can walk to without crossing major streets and roads.

If you wish to have your child assigned to an alternate bus stop for reasons including divorce, childcare or otherwise desire an exception to a child's assigned bus stop or eligibility; this form will need to be filled out completely and returned to the Pupil Transportation Department **each school year the exception is requested**. **NOTE: SCHOOL OF CHOICE & IN-DISTRICT TRANSFER STUDENTS are responsible for their own transportation.**

Please allow (5) five days for the Pupil Transportation Department to determine if an exception can be made and to authorize and communicate a change if approved. Please use one form for each school of attendance of affected students.

School Year: 2019-2020 **School:** _____

Student Name: _____ **Grade:** _____

Student Name: _____ **Grade:** _____

Student Name: _____ **Grade:** _____

Parent/Guardian: _____ **Day time Phone:** _____

Email Address: _____

Home Street Address: _____ **Zip Code:** _____

Current Route #: _____ **Current Bus Stop:** _____

_____ **My Child is currently NOT eligible for Transportation Services**

Reason for alternate bus stop: _____ **Childcare** _____ **Divorce/Custody** _____ **Other** **Please Explain:**

_____

Requested Route #: _____ **Requested Bus Stop:** _____

_____ **To and From School** _____ **In to School only** _____ **From School only**

Alternate/Care Giver Address: _____ **Zip Code:** _____

Care Giver Name: _____ **Phone:** _____

I understand that I am responsible for my child getting to and from the bus stop safely and that I must submit a new request each school year.

Parent/Guardian Signature_____ **Date**_____