



## DORCHESTER SCHOOL DISTRICT TWO

### Bus Rider Verification Form

School Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_ Permanent Rider: Service Start Date \_\_\_\_\_

\_\_\_\_\_ Temporary Rider: Dates Authorized \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_ Temporary Rider: Riding with \_\_\_\_\_

AM Route #: \_\_\_\_\_ Pick Up Address: \_\_\_\_\_

PM Route #: \_\_\_\_\_ Drop Off Address: \_\_\_\_\_

Administrator Name: \_\_\_\_\_ Administrator Signature: \_\_\_\_\_

Bus Driver Signature: \_\_\_\_\_

\*\*\* Form must be signed by a school administrator and presented to the bus driver before the student boards the bus.

\*\*\* Driver will be responsible to verify, sign and deliver this form to the Transportation Department.



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