



Higley Unified School District #60

DUAL HOUSEHOLD

TRANSPORTATION APPLICATION

Student's Name _____
Last First Middle Initial

This is a request for school year 20____ - 20____ (one school year only) Grade _____

School Attending _____ Student ID# _____

1. Home Address _____

City _____ State _____ Zip Code _____

Home # _____ Cell Phone _____ Work Phone _____

Email Address _____

Relationship _____

2. Home Address _____

City _____ State _____ Zip Code _____

Home # _____ Cell Phone _____ Work Phone _____

Email Address _____

Relationship _____

The parent/guardian signing this application affirms that the student seeking transportation will abide by the student transportation rules and regulations. Parents requesting transportation must get their students to and from the nearest available bus stop. Stops CANNOT be added, moved, or in any other way adjusted for dual household students. Both student addresses must be verified by the student's home school and listed in the student's file.

Parent/Guardian Signature _____ Date _____

ACCEPTANCE IS ON A YEAR-TO-YEAR BASIS ONLY AND MUST BE REQUESTED EACH YEAR AND MAY BE REVOKED AT ANYTIME.

District Use Only

Request Approved: Yes No Route ID: _____ Service Times: _____ AM _____ PM

Service Location: _____

Transportation Rep: _____
Signature Date

School Rep: _____
Signature Date

Return this form in PDF to:

Higley USD Transportation Department
2140 S. Higley Rd
Gilbert, AZ 85296
-OR-
transportation@husd.org

