

# Montrose Area School District

## Transportation Change Request

### 2024-2025

This form must be completed in order to make transportation changes that will be long term. To make a change for one day or for a few days, please send a written note with your child(ren) to school and our building principals will approve those requests daily.

<b>Student Name(s):</b>	
<b>Current Bus #:</b>	
<b>Address of New Bus Stop:</b>  If elementary age, name of person responsible for student(s) at new bus stop:	<b>Reason for change:</b> <input type="checkbox"/> Moved – proof of residency required  <input type="checkbox"/> Babysitter/Day Care  <input type="checkbox"/> Parent(s) will transport  <input type="checkbox"/> Student(s) will be driving (Grades 11 and 12 only) and must be approved through the high school
<b>Please circle the days and times of change:</b>  <input type="checkbox"/> Every Day    am    pm    both <input type="checkbox"/> Monday       am    pm    both <input type="checkbox"/> Tuesday       am    pm    both <input type="checkbox"/> Wednesday    am    pm    both <input type="checkbox"/> Thursday      am    pm    both <input type="checkbox"/> Friday          am    pm    both  <input type="checkbox"/> For the remainder of the school year <input type="checkbox"/> For the following dates  _____ to _____	<b>Additional Notes:</b>        
Does your child(ren) have allergies or disabilities that you would like our transportation department to be aware of?	

This request is to change transportation for my child(ren) for the school year of 2024-2025.

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Parent/Guardian Name (print)	Parent/Guardian signature
Date _____	

Please return completed form to JoAnne McCain, Transportation Director via email, fax, or dropping off at one of our buildings.

Email: [jmccain@masd.info](mailto:jmccain@masd.info)    Fax: 570-278-4798    Phone: 570-278-6227