

SWEET HOME CENTRAL SCHOOL DISTRICT

SPECIAL BUSING REQUESTS (SBR) FORM

This form is used for parents or guardians of students in the Sweet Home school district to temporarily change their student's pick up location or drop off location from other than the student's home address, such as day cares (D/C), relative's home, babysitter's home etc. This form is not to be used for transportation to a student's place of employment at any time.

Note: All Special Busing Requests expire at the end of each school year. If the parent or guardian needs the form to be carried over to the following school year, a new form is required.

This special busing request must be submitted to the home school whenever the school involved is one of the following: *Sweet Home High, Sweet Home Middle, Heritage Heights, Glendale, Maplemere, or Willow Ridge* elementary schools.

Private or parochial school students: The form must be sent directly to the Sweet Home Transportation Department. Special requests will be approved for one alternative location other than the student's home that is within the Sweet Home School District.

All pick up/drop off spots must be approved and are approved at the sole discretion of the district; No pickups and/or drop offs to cars, vacant parking lots, etc. Also, any stop that the district believes is unsafe to the student(s) or the bus will be declined. The special busing request can vary day to day, but has to remain consistent from week to week (weekly schedule changes will not be approved). Any change in the request must be directed to the home school (or the transportation dept. for private and parochial schools) for authorization on a new form. The affected *Sweet Home School* will then notify the transportation department for approval and driver notification. (In the case of a private or parochial school, the transportation department will notify the guardian on the form.)

Approved special busing will begin three days after receipt of the request. It is recommended that all requests should be made at least one week before the service is to begin.

Emergency requests or a one day pass will be approved on a day-to-day basis. These requests should go through the school for approval. These requests do not require this form. These requests will be handled by a one day pass authorized from the affected *Sweet Home School* to the bus driver. An emergency request will only be approved for transportation within the attendance zone of that school.
(*Not applicable to private and parochial schools*).

Parent or guardian notes to the drivers requesting another student (not scheduled for that bus) to ride with their child, will be declined and denied transportation. Requests of this nature need to be previously authorized by the district.

If you have any questions, please do not hesitate to contact our transportation office at 716-250-1435 or fax 716-250-1439.

Sincerely,
Scott Kennedy
Sweet Home Transportation Supervisor

businfo@sweethomeschools.org

SWEET HOME CENTRAL SCHOOL DISTRICT
DEPARTMENT OF TRANSPORTATION
Special Busing Request (SBR)

APPLICATION FOR SPECIAL TRANSPORTATION
For changing the drop off and/or pick up location for a student(s)

STUDENT'S NAME _____
LAST FIRST MI

HOME ADDRESS _____

HOME PHONE # _____ EMERGENCY PHONE # _____

SCHOOL OF ATTENDANCE: (check one)

Heritage Hts. _____ Maplemere _____ Glendale _____ Willow Ridge _____

Middle School _____ High School _____ Out of District School (Name) _____

Transportation Request: (Briefly describe where your child is to be picked up and dropped off)

NOTE: One pickup/drop off location other than your home address may be designated. Location of pickup/drop off must be within the attendance zone of school or an authorized day care center within the Sweet Home School District. (Please see back of form for further details)

Monday A.M. _____ P.M. _____

Tuesday A.M. _____ P.M. _____

Wednesday A.M. _____ P.M. _____

Thursday A.M. _____ P.M. _____

Friday A.M. _____ P.M. _____

Requested beginning date: MONTH _____ DAY _____ YEAR _____

Approved Special Busing Request will begin within 3 days of receipt of request.

In requesting special transportation, I agree to and accept the responsibility of providing instruction to my child so that he/she understands the travel arrangements as requested. I also agree to insure that there will be a responsible adult at the drop off location to receive my child*. *(Elementary school children)

Parent/Guardian Signature _____ Date _____

COMMENTS: _____

Signature of Building Administrator _____ Approved _____ Disapproved _____

Signature of Transportation Supervisor _____ Approved _____ Disapproved _____

Comments _____

FOR PRIVATE AND PAROCHIAL SCHOOL STUDENTS, PLEASE FAX FORM TO: (716) 250-1439
OR EMAIL TO: businfo@SWEETHOMESCHOOLS.ORG

Sweet Home Transportation
1741 Sweet Home Road
Amherst, NY 14228
250-1435



Revised 11/2024

SWEET HOME CENTRAL SCHOOL DISTRICT
DEPARTMENT OF TRANSPORTATION
Special Busing Request Form (SBR)

APPLICATION FOR SPECIAL TRANSPORTATION
For changing the drop off and/or pick up location for students

STUDENT'S NAME Doe John M.
LAST FIRST MI
HOME ADDRESS 123 Sweet Home Rd. Amherst, NY 14228
HOME PHONE # 716-000-0000 EMERGENCY PHONE # 716-000-0001
SCHOOL OF ATTENDANCE (Check one):
Heritage Heights ☒ Maplemere _____ Glendale _____ Willow Ridge _____
Middle School _____ High School _____ Out of District School (Name) _____

Transportation Request: (Briefly describe where your child is to be picked up and dropped off)

NOTE: One pickup/drop off location other than your home address may be designated. Location of pickup/drop off must be within the attendance zone of school or an authorized day care center within the Sweet Home School District. (Please see back of form for further details)

Monday	A.M.	<u>Home</u>	P.M.	<u>Home</u>
Tuesday	A.M.	<u>Shining Stars D/c</u>	P.M.	<u>Home</u>
Wednesday	A.M.	<u>Home</u>	P.M.	<u>Shining Stars D/c</u>
Thursday	A.M.	<u>Shining Stars D/c</u>	P.M.	<u>Shining Stars D/c</u>
Friday	A.M.	<u>Home</u>	P.M.	<u>Home</u>

Requested Beginning Date: MONTH September DAY 7 YEAR 2022

Approved Special Busing Request will begin within 3 days of receipt of request.

In requesting special transportation, I agree to and accept the responsibility of providing instruction to my child so that he/she understands the travel arrangements as requested. I also agree to insure that there will be a responsible adult at the drop off location to receive my child (Elementary school children)*

Parent/Guardian Signature Jane Doe Date 8-11-2022

COMMENTS: Mr. Sam Doe (grandpa) can get John
off the bus.

Signature of Building Administrator	Approved _____	Disapproved _____
Signature of Transportation Supervisor	Approved _____	Disapproved _____
COMMENTS: _____		

FOR PRIVATE AND PAROCHIAL SCHOOL STUDENTS, PLEASE FAX FORM TO: (716) 250-1439 OR EMAIL TO: SKENNEDY@SWEETHOMESCHOOLS.ORG

Sweet Home Transportation
1741 Sweet Home Road
Amherst, NY 14228
250-1435

