

FILE: EEAA

MEDFORD AREA PUBLIC SCHOOL DISTRICT

DATE ADOPTED: April 20, 2000 **FILE SECTOR: SUPPORT DISTRICT**
DATE REVISED: February 17, 2005 **POLICY TITLE: STUDENT TRANSPORTATION /**
DATE REVISED: July 19, 2012 **ROUTE REQUESTS**

It is the goal of the Medford Area Public School District to provide safe, timely, and economical transportation for all eligible students residing within school attendance boundaries as designated under provisions of the appropriate Wisconsin State Statutes and board of education policies governing pupil transportation. The Medford Area Public School District shall accommodate transportation needs of district students according to the procedures and conditions established in EEAA-R.

CROSS REFERENCE: EEA, EBCD, EEAA-R, EEAA-R-E, JECBD, AND JECC
LEGAL REFERENCE: Wis. State Stat. Chapters 120 and 121

Medford Area Public School District
Bus Routes
New/Alternate Pick-up/Drop-off Form
(Return to School Office)

FILE: EEAA-R

Alternative Transportation Requests

1. New Student requests for transportation following the registration of a new student must be made in writing using the New/Alternate Pick-up/Drop-off Form for any student who registers after June 15. A copy of that New/Alternate Pick-up/Drop-off Form should be forwarded to the Director of Transportation so that a building assignment for the student can be made concurrent with policy JECC (Assignment of Students to Schools). Routes may be re-scheduled to accommodate newly registered K-12 students who reside within the district boundaries and these requests will be accommodated in as timely manner as practical.
2. Requests for transportation to and/or from a child care provider must be made in writing using the New/Alternate Pick-up/Drop-off Form.
3. Requests for more than one pick-up/drop-off must be made in writing using the New/Alternate Pick-up/Drop-off Form.

Requests for a change in the established pick-up/drop-off must be made in writing using the New/Alternate Pick-up/Drop-off Form.

Changes (Each change will require completing a new New/Alternate Pick-up/Drop-off Form.)

All permanent New/Alternate Pick-up/Drop-off Forms must be received before a change is to become effective during the school year. Phone calls cannot be accepted except in emergency situations. Such exceptions must be approved by the building principal or his/her designee.

2. A New/Alternate Pick-up/Drop-off Form must be completed for each new school year.
3. School buses will not deviate from scheduled routes during the year to accommodate a change in a child care provider once the route has been established at the beginning of the school year unless the route change can be reasonably accommodated by the transportation contractor.

Pick-up and drop-off points must be on a scheduled basis and must be documented on the New/Alternate Pick-up/Drop-off Form.

Please check the appropriate box(es).

- New student registration
(To be completed for any student who registers after June 15).
- Beginning of the year pick-up/drop-off request:
(To be completed for any student who will go to any address which differs from that of the first or primary legal guardian).
- Request for additional pick-up/drop-off.
(To be completed for any student who will have more than one pick-up/drop-off point. The additional pick-up/drop-off must be received by the contractor before it will become effective; the additional pick-up/drop-off must be on a scheduled basis).
- Request for change in pick-up/drop-off.
(To be completed for any student who requires a change in their current pick-up/drop-off point. This New/Alternate Pick-up/Drop-off Form must be received by the contractor before it will become effective; the pick-up/drop-off must be on a scheduled basis).

Medford Area Public School District
Bus Routes
New/Alternate Pick-up/Drop-off Form
(Return to School Office)

FILE: EEAA-R-E

Name of Child: _____ Grade: _____ School: _____

Parent #1

Parent #2

Name: _____
Address: _____

Name: _____
Address: _____

Phone: W _____
H _____

Phone: W _____
H _____

I request that my child be transported to and/or from the designated address(es) listed below:

To School From School Both

Name of Residence Holder: _____
Address: _____
Phone: _____

Days: Monday Tuesday Wednesday Thursday Friday ALL

_____ Effective Date

Comment: _____

To School From School Both

Name of Residence Holder: _____
Address: _____
Phone: _____

Days: Monday Tuesday Wednesday Thursday Friday ALL

_____ Effective Date

Comment: _____

Completed by: _____
Parent/Guardian Signature

_____ Date Signed

_____ Principal (Designee) Signature

School Personnel: Fax ALL forms to Transportation Contractor
Pick-up/drop-off change/addition copy to Classroom Teacher