

Palmyra Area School District Transportation Request Form

1125 Park Drive, Palmyra, PA 17078

Phone: (717) 838-3144 ext. 4 Fax: (717) 838-5105

E-mail: pasd_transportation@pasd.us

COMPLETED BY ALL REQUESTS

Student Name			
Parent/ Guardian Name			
Address			
Telephone		E- mail Address	
Assigned School	Grade:	Teacher:	
Parent/ Guardian Signature			Date

FOR NEW STUDENTS ONLY

Students may only be assigned to one AM and one PM route. For exceptions see Board Policy 810

AM Requested Stop Location	At Home Other (please circle)
If other please give location and address	
Reason for other stop location	

PM Requested Stop Location	At Home Same as Above Other (please circle)
If other please give location and address	
Reason for other stop location	

COMPLETE FOR STUDENTS NEEDING A CHANGE WITH TRANSPORTATION

Current Bus Assignment	AM bus #	PM bus #
Current Stop Location		

Requested AM Stop Location

Requested PM Stop Location

Reason for change in stop location	Start Date: (Up to 5 day notice required)
------------------------------------	--

New Assignment Information (District use only)

AM Bus #	Pick Up Time:	Stop:
Transfer Bus#	To:	
PM Bus #	Drop Off Time:	
Effective Date		
Approved by	Date:	

Denied	Reason
--------	--------

Cc: Bus Company _____ School Office _____ teacher _____ parent _____ BT _____ PS _____