

SALT RIVER ELEMENTARY SCHOOL BUS STOP SUPERVISION WAIVER FORM SALT



Date

(KINDERGARTEN STUDENTS ONLY)

Education Transportation Department student bus transportation to release	n and submit to the Salt River Elementary S nent for further review/approval to provide ise your <u>Kindergarten</u> student(s) at their ass student(s) OR to identify the person(s) autl	permission for the igned bus stop <u>with</u> a	
Student Name	Teacher		
Student Name	Teacher	Teacher	
released from the school bus NOTE: If designated person listed bettee the first or higher grade. If the olde	pelow (<u>limit of two</u>) is the student's older sib or sibling stays for after school program, or r nade for your younger child to have proper	ling(s) they must be in not on the bus for any	
1. Name	Relationship	Phone Number	
2. Name	Relationship	Phone Number	
	sent at bus stop, bus driver will return your s nes, bus riding privileges will be reviewed a		
Parent/Guardian Signature	Print Parent/Guardian Name	Date	

Please submit this signed form either in-person to the Education-Administration Building or you may mail it to the following address: SRPMIC Education Transportation, 10,005 E. Osborn Rd., Scottsdale, AZ 85256.

Education Transportation Department Signature

BEFORE THIS REQUEST TAKES EFFECT, THE EDUCATION TRANSPORTATION DEPARTMENT WILL REQUIRE A MINIMUM OF 3 SCHOOL DAYS TO PROCESS.

Effective 7.21.2015 Page 1 of 1