



SPACE AVAILABLE BUS TRANSPORTATION REQUEST FOR THE 2021-2022 SCHOOL YEAR

Parent/Guardian Name(s) _____

Home Address _____ Home Phone _____

Sitter's Address _____ Phone _____

Student Name _____ Grade _____

Student Name _____ Grade _____

Student Name _____ Grade _____

SCHOOL ATTENDING _____

Closest Bus Stop Location (if known) _____

Requesting Transportation (check one) _____ am & pm _____ am only _____ pm only

I request that the Parma Board of Education consider transporting my child(ren), named above, who live within the designated walking area for our school district.

I understand that ridership will be on a space available basis and that priority will be given to the youngest students who live the greatest distance from school. I also understand that my child may be bumped by an eligible rider at any time.

I understand that this service will begin approximately October 22, 2021.

I further understand that students will be required to walk to an **existing stop** in a transportation eligible zone within 1/2 mile of my residence. I understand that the bus stop must be at the same location for both am and pm. Existing bus routes will not be modified to accommodate this request.

Parent's Signature _____

Date _____

Return completed applications to:

Parma City School District
ATTENTION: TRANSPORTATION DEPARTMENT
7600 Day Dr
Parma, Ohio 44129
Phone (440) 885-2326
Fax (440) 842-7358
bus@parmacityschools.org

To be completed by Transportation Dept

Approved

Bus # _____

Bus Stop _____

Stop Time _____

Effective Date _____

Completed by – Transportation personnel _____

Not Approved

Reason _____

Date _____ Notified _____