LYNDEN CHRISTIAN SCHOOLS BUS CHANGE FORM

Additional students may not ride on a bus unless is has been approved by the bus driver through the Transportation Department and the office at least 24 hours in advance. The driver must also receive a permission slip written and signed by a parent before a child will be permitted to ride.

Several of our buses do not have the extra seating space so it is imperative to check with the bus driver.

Student's Name:	
	Teacher:
My child must ride the bus to the following location:	
Date of Requested Change:	
Pick up or Drop off Address	
Parent Signature	Date:
Transportation Department Use Only:	
Request Approved []	Request Denied [] see comments
If request is approved: A.M. Bus	# Pickup Time:
P.M. Bu	s # Drop off Time:
Comments:	
Request Reviewed By:	Date:

This form will be returned to the Students Home Room teacher and must accompany the student when boarding the requested bus.