

EAST PROVIDENCE SCHOOL DEPARTMENT
145 TAUNTON AVENUE, EAST PROVIDENCE, R.I. 02914
TELEPHONE: 431-4632 FAX: 572-3875

TRANSPORTATION APPEAL FORM FOR SCHOOL YEAR 2018-19

STUDENT NAME: _____ GRADE: _____ SCHOOL: _____

STUDENT ADDRESS: _____ TELEPHONE: _____

I AM REQUESTING TRANSPORTATION FOR MY CHILD(REN) AM _____ PM _____

I UNDERSTAND and AGREE to the FOLLOWING:

- An Appeal is to grant transport upon availability;
- Bus Stops are developed based on the number of students and mileage restriction set forth by the EP School Committee;
- Appeal forms, along with proof of residency, **must be filed** with the EP School Transportation Dept – **ANNUALLY**;
- **All** Students are expected to follow the Bus Code of Discipline, at all times, or their appeal **will be** revoked; and
- Parents are responsible for children's safety to and from the bus stop. NOTE: Students grades K-2, must be picked up by an authorized adult.

REASON: _____

Parent/Guardian _____
Please Print

Parent/Guardian Signature _____ Date _____

Proof of Residency _____

Transportation use only:

Approved: _____ Denied: _____ Start Date _____

Bus # _____ **Pick-Up Time:** _____ **Stop:** _____

Bus# _____ **Return Time:** _____ **Stop:** _____