Riverside Local Schools Transportation Department Request for Location of School Bus Stop Change

For the protection and safety of our students, a r writing from a custodial parent or guardian. with the final decision will be forwarded. While approved. Students are not to change his/her sch Riverside Local Schools, Board of Education to Corner, cluster or group stops is the current Boa	Each request will be investigated each request will be considered, ool bus stop without prior approv change a stop location for conver	and a follow up letter do not assume that val. It is not common nience or due to weat	er or telephone call your request will be practice of the ther conditions.	
Student Last Name:	Student First Name:			
Address:	City:	Zip:		
Home Phone:	School (circle): RHS	JRW	LaMuth	
Buckeye Elem. Hadden Elem. Hale	Rd. Elem. Leroy Elem.	Madison Elem.	Melridge Elem.	
Parent/Guardian Last Name:	Parent/Guardian First 1	Name:		
Parent/Guardian Work Phone: _()	Parent/Guardian Cell F	Parent/Guardian Cell Phone: ()		
REQUEST FOR LOCATION OF STOP (CHANGE:			
A.M. Change Request:		Bus	Number:	
From:			(current stop)	
То:			(requested stop)	
Reason:				
P.M. Change Request:		Bus	Number:	
From:			(current stop)	
То:			(requested stop)	
Reason:				
Parent/Guardian Signature	Date			
Stop location change requests for the 2016-2017 set to: Riverside Local School District Transportation Department 585 Riverside Dr. Painesville, Ohio, 44077	chool year are to be submitted by (October 1. Please retu	rn request in writing	
For Office Use Only: Received On/By	_ Approved: Denied:	Entered:	Notified:	