

PERRYSBURG SCHOOL DISTRICT

ALTERNATE TRANSPORTATION REQUEST FORM

Date: _____

I am requesting the following student be transported (circle) **TO** **FROM** **BOTH** the alternate address below:

Student Name: _____

School: _____ Grade: _____

Home Address: _____

Parent / Guardian Phone: _____

Alternate Residence Name: _____

Alternate Address: _____ Phone: _____

Reason (circle one): SHARED PARENTING CHILD CARE OTHER (explain): _____

Days at alternate location (circle): **MON** **TUE** **WED** **THUR** **FRI**

Parent/Guardian Signature _____ Print Name: _____

GUIDELINES PLEASE READ:

- The request may be approved if the alternate stop is in the home attendance area and.....
- The stop is permanent (current school year only-forms are submitted each year)
- Space is available
- *Request may take 3-5 days to process*
- *If request is approved you can view updated transportation details on the Transportation Parent Portal via the Perrysburg schools website:*
<https://versatransweb05.tylertech.com/Perrysburg/mlinkrp/Login.aspx>
- *If request is NOT approved transportation department will contact you*

Please return this form to:Perrysburg Schools, Transportation office, 25715 Ft Meigs Rd;
 Fax 419-872-6473 or email transportation@perrysburgschools.net

For transportation department only:

 Approval Signature