



OXFORD COMMUNITY SCHOOLS
WHERE THE GLOBE IS OUR CAMPUS

DAYCARE/MULTIPLE HOUSEHOLD BUS STOP REQUEST

This form is to be used if you are requesting a pick up or drop off other than your student's current assigned bus stop.

Student(s) Name	School	Grade	Date
Home Address	City	Zip Code	Home Phone
Parent Name	Email Address	Cell Phone	Work Phone

AM Alternate Address	DAYS USED (Please Circle) M T W Th F	Name and Phone
PM Alternate Address	DAYS USED (Please Circle) M T W Th F	Name and Phone

Reason for Request

The Transportation Department will review requests based on board policy and established guidelines. BUS STOP may be at a different location from the alternate address.

All requests will be responded to either in writing or with a phone call within 10 days of receipt of this form.

FOR TRANSPORTATION USE ONLY			
<input type="radio"/> Accepted	Date:	Initials:	<input type="radio"/> Denied
BUS #	BUS STOP:		Reason Denied
Other Information			

Please return form to:
 Oxford Community Schools
 Transportation Department
 1500 Lakeville Road
 Oxford, Michigan 48371