



### 2019-2020 Student Transportation Form

The School District of Beloit provides transportation through Durham School Services (608-362-2628). All students in PreK through 3<sup>rd</sup> grade who reside one or more miles walking distance from the student's resident school or live in a designated hazardous area shall be eligible for bus transportation. All students in 4<sup>th</sup> through 8<sup>th</sup> grade who reside two or more miles walking distance from the student's resident school or live in a designated hazardous area shall be eligible for bus transportation. Eligible transportation will be provided at no additional cost to the student/family by the School District of Beloit. The School District of Beloit also provides transportation for other students in accordance with state law. Students who meet the above qualifications are eligible for transportation for one round trip to school each day they actually attend.

In order for a student who meets the above requirements to qualify for transportation, the parent/legal guardian must fill out the application below and return it to your child's school.

**McKinney-Vento (Homeless):** Do not fill out the application below, please contact your child's school to speak with the School Homeless Liaison. They will work with you to set up your transportation needs, if eligible, and will complete the application for you.

Parent Request

**Reason for Transportation:**

- Hazard Zone
- Outside Walk Zone

School District Request

**SDB Status:**

- Medical 504 Plan: \_\_\_\_\_
- District Placement-Res School: \_\_\_\_\_
- SDB Approved by: \_\_\_\_\_
- Emailed to Durham Date: \_\_\_\_\_

**NOTE: Transportation requests may take up to 5 days for processing.**

Student First Name	Student Last Name	Grade	School	Birthdate	Student ID

**Student Address (Only the student's PERMANENT residence can be used for transportation)**

\_\_\_\_\_

Primary Phone Number	Secondary Phone Number	Emergency Contact Name	Emergency Contact Number
( )	( )		( )

I understand this information is being provided to the bus company Durham School Services.

Print Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**DURHAM SCHOOL SERVICES USE ONLY**

**Durham Status:**

- Approved  Denied

**Reason For Transporting:**

- Hazard Zone  Outside Walk Zone
- Medical  District Placed

Confirmed By: \_\_\_\_\_

Start Date: \_\_\_\_\_

Bus #: \_\_\_\_\_ Route #: \_\_\_\_\_

AM Stop: \_\_\_\_\_ Time: \_\_\_\_\_

PM Stop: \_\_\_\_\_ Time: \_\_\_\_\_