

Wyomissing Area School District
Request of Temporary Transportation Deviation

(Complete a separate form for each child)

Allow four (4) business days for this request to be processed

Form Must be Returned to School Office for Processing and must be submitted each school year

Student Name: _____

Grade: _____ School Attending: _____

Home Address: _____

Regularly Assigned Bus #: _____ Bus Stop: _____

Requested Bus #: _____ Bus Stop: _____

Reason for request: _____

Requested Start Date: _____ End Date: _____

Requested Time (Please mark for AM or PM only or Both:

AM pick-up – Time: _____

PM drop-off – Time: _____

Parent/Guardian Information (Please Print):

Name: _____

Phone Number: (____) _____

Email: _____

Signature of Parent/ Guardian: _____ Date: _____

Office Use Only

Approved: _____ Denied: _____

Signature of Transportation Supervisor

Date

Principal

Date

Current WASD policy permits students to change bus stops or bus routes within policy and with the school principal's permission upon prior written request of the parent/guardian. These deviations are limited to established stops and if seating is available. The Wyomissing Area School District does not confirm arrangements or share information with daycare providers. It is the responsibility of the parent/guardian to make the necessary arrangements with the daycare provider you have selected. This form must be submitted each school year, prior year requests will not be carried over from previous school years.