

To be completed for all students that are aged 12 or younger. This will only need to be completed once, unless there are changes required to the consent being given.

Student's Name:	
School:	
Grade:	
Please check the appropriat	te option for your student.
designated bus stop	plan in place for my child which allows them to be dropped off at their p on their own without a parent, guardian, older sibling, babysitter or vsically present to walk them home.
emergency contact acknowledge that it	y child on the bus if I or my designated guardian (as indicated on my child's information with the school) are not physically present at the bus stop. It is my responsibility to pick up my child at their school if the Transportation een unable to reach me at the numbers I have provided.
I understand that if my circu change by providing an upd	umstances change, it is my responsibility to notify my child's school of the dated form.
Parent's Name:	
Parent's Signature	
Date:	
Please return this signed for	rm to your child's school.