

TRANSPORTATION SHUTTLE REQUEST

(Use only for recurring trips scheduled during the school day)

Please note:

- 1) **Requests may take up to 4 business days to process** before transportation service begins.
- 2) **Use this form ONLY to request a trip that is scheduled during the school day and repeats multiple times.** Complete the SPECIALIZED TRANSPORTATION TO/FROM SCHOOL to request transportation services to and from school. Use the FIELD TRIP REQUEST FORM to submit a request for a single occurrence trip.
- 3) **Any changes to this shuttle request must be submitted in writing** on another SHUTTLE REQUEST form; bus drivers are not authorized to make changes to any trip details.
- 4) **Please attach a list of the names of students who will ride this shuttle, and indicate those with Emergency Health Care Plans.**
- 5) Please send your completed Transportation Shuttle Request to the following email address: **transportation.helpdesk@shorelineschools.org**. Transportation staff will email you a confirmation once the shuttle has been assigned.

Name of Requester:	Date submitted:	
Phone:	Student Name:	
Email:	___ New Request ___ Change to existing	
Requested Start Date:	Requested Days of Week:	
Requested End Date:	M T W TH F	
Pick Up Location:	Pick Up Time:	
Drop Off Location:	Drop Off Time:	
Return Pick Up Location:	Return Pick Up Time:	
Number of Students (see Note 4, above):	Number of Adults:	
Travel Needs: <input type="checkbox"/> Walk Assist <input type="checkbox"/> Wheelchair (how many? _____) <input type="checkbox"/> Car Seat (# needed _____) <input type="checkbox"/> Safety Vest (# needed _____) <input type="checkbox"/> Other _____	Additional information to assist with Transportation services:	
TRANSPORTATION OFFICE USE ONLY		
Approved by:	Date shuttle assigned:	Start date of shuttle:

Questions? Please call Transportation at ext. 1500.