

**Wayland Public Schools
Bus Route Change Request Form**

Dear Parent/Guardian:

All requests for a change to your student's bus route or stop must be submitted in writing to the Transportation Coordinator. Requests will be dealt with as timely as possible and in the order in which received. In most cases, you should receive an acknowledgement of receipt within 3 business days. However, depending on the time of year the request is made and the number of requests on hand, a determination on your request may take up to 3 weeks.

All information on this form must be complete and accurate to be able to respond to any request. Safety concerns will take the highest priority and changes for convenience which negatively impact the safety, capacity, or timeliness of the bus will not be considered. Please return this form to the Business Office at 41 Cochituate Road, PO Box 408, or via e-mail to dianne_potter@wayland.k12.ma.us

Student Name: _____ School: _____

Bus # AM _____

Bus # PM _____

Submitted by: _____ Address: _____

Telephone: Home: _____ Work: _____

Cell: _____ E-mail: _____

Bus Route Change Request:

Office Use Only

Date Received:

Action Taken:

Notification Given: