

Temporary Bus Request

For Emergency Bus/ Stop Change

Central Columbia School District

4777 Old Berwick Road Bloomsburg, PA 17815

570- 784-2850

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Child's Name: _____ School: _____

Home Address: _____ Grade: _____

_____ Date: _____

.....
Reason for
Request: _____

Arrangements requested: _____

Parent/ Guardian Name: _____

Phone Number: _____

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Please Note

The Central Columbia School District has the right to approve or deny any request for a bus stop change. Only requests to change a student's bus stop to an already existing bus stop will be considered. No new stops will be added. Once the request has been reviewed and either approved or denied, that parent/guardian will be notified.

Please remember this form is for emergency purposes only.

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For District office use only

Approved: _____ Date of Emergency Bus change: _____

Denied: _____ Bus # and stop assigned: _____

Date: _____

Signature of Transportation Supervisor