

**MIDDLETON SCHOOL DISTRICT #134 POLICY
AND PROCEDURE MANUAL
SECTION 8000 – Non Instructional Operations**

Patron Form for Requesting a Change in an Established Bus Route.....PROCEDURE 8010-P2

*Requests for established bus routes changes
are reviewed by the Board only in January or July regular meeting.*

Date of Request: _____ (Submit this completed form to Supt. Office & Trans. Dept.)

Parent/Guardian's Printed Name: _____ **Phone:** _____

Physical Address: _____

Student's Name: _____ **Grade Level:** _____

School Student Attends: _____

Location of Requested Route Change Area: _____
(Please attach a map detailing the current bus route streets and requested change.)

Is this a private lane (blue street sign)? _____

Distance from the School: _____

Description of Requested Change: _____

Please comment on any item listed below that would apply to the situation that prompted your request for a change in an established bus route:

1. Average hourly traffic, during school arrival & departure both morning & afternoon.
2. Truck traffic during school arrival & departure both morning & afternoon.
3. Posted traffic speed.
4. Width of road(s).
5. Sidewalks or shoulder of road.
6. Traffic control signs & markings.

7. Visual obstructions (trees, shrubs, hills, curves, buildings, etc..)
8. Cross traffic.
9. Special conditions (extraordinary factors, fences, open waterway, etc.).
10. Other safety concerns:

Parent/Guardian's Signature: _____ **Date:** _____

The following steps outline the process for reviewing a request for an established bus route change:

1. *Deadline to be submitted to District Office two weeks prior to January 1st of the school year and two weeks prior to July 1st of the school year.*
2. *The parent/guardian submits their request on this District provided form to both the transportation supervisor and the Superintendent.*
3. *The Superintendent and transportation supervisor will then visit the site of the proposed route change and review the information provided on this form.*
4. *The Superintendent and transportation supervisor will determine the merits of the request based on predetermined criteria.*
5. *The Superintendent and transportation supervisor will prepare a recommendation for the Board, either for or against approval of this requested route change.*
6. *The Superintendent and transportation supervisor's recommendation will be presented to the Board at their next regular July or January meeting.*
7. *The parent/guardian will be notified of the Board's decision by the Superintendent or his designee. If the requested change is granted Board approval, the parent/guardian will be notified of the date on which the requested change in the route will occur.*

District Office Use Only	
Request Approved _____	Date that route change will occur _____
Request Denied _____	Rationale _____

Superintendent's Signature _____	Date _____
Board Chairman's Signature _____	Date _____

cc: *Transportation Supervisor*

DEVELOPED: 11/08/05
REVISED: 3/9/2015