



CHICHESTER SCHOOL DISTRICT



Request for Change in Transportation Assignment

The Chichester School District may transport pupils to and from a residence within the district, other than the pupil's home residence, where the following conditions are met:

1. The change from one bus to another does not create an overcrowded situation.
2. The change does not effect the time or routing of a particular run.
3. The change will exist for at least one (1) school year.
4. The parents/guardians must sign a request form #LR-109 and have same notarized.
5. The request does not entitle an ineligible bus rider to ride a bus.
6. All requests will be considered on individual merit.
7. Request forms must be resubmitted at least 45 days prior to the start of each school year.

My signature below signifies that I have read and understand all the above mentioned conditions attached to this affidavit.

Signature of Parent/Guardian

Date



CHICHESTER SCHOOL DISTRICT



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I/We the parent(s) of _____ hereby
 request permission for the above named students to be changed from Bus # _____ to
 Bus # _____ for the A.M./P.M. session of school I/We further agree to transfer the
 responsibility for the students to _____
 whose permanent residence within the School District is _____
 _____. This change request shall exist for at least the
 remainder of the current school year.

Any falsification of fact on this form shall constitute reason for immediate
 discontinuance of bus service to the parties here in identified.

 Signature of Responsible Party

 Signature of Parent or Guardian

 Signature of Parent or Guardian

 Address

 Address

 Date

 Date

 Notary Public Seal

 School Attending