



Rivers Edge Elementary School

Change of Transportation Form

Student's Name _____

Teacher _____ Grade _____

Date _____

I hereby grant permission for my child to use the following alternate transportation today:

1st Load 2nd Load

Bus No. _____ (1st or 2nd load) to the following address: _____
with (student's name) _____

FOR KG. STUDENTS ONLY, please list the name of the adult who will be meeting your child at the bus stop. _____

Car Rider to be picked up by _____

Daycare pick-up to _____

Walker with _____

Picked up in the office by _____ at _____ a.m./p.m.

for the following reason _____

Other: _____

Parent Signature _____

Additional Comments: