

INDIAN HILL EXEMPTED VILLAGE SCHOOL DISTRICT  
TRANSPORTATION DEPARTMENT

6200 Drake Road  
Cincinnati, Ohio 45243  
Office: 272-4531 - Fax: 272-4535

2011 – 2012 School Year

LONG TERM ALTERNATIVE TRANSPORTATION REQUEST FORM

In order for parents to designate any alternative transportation, a signed waiver must be on file with the Indian Hill School District. Requests for long term alternative transportation must be submitted to the Transportation Department. Please allow up to one week for the Transportation Department to consider your request.

STUDENT NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
(please print)

STUDENT ADDRESS \_\_\_\_\_ PARENT DAYTIME PHONE \_\_\_\_\_

SCHOOL ATTENDING \_\_\_\_\_ HOMEROOM \_\_\_\_\_

STUDENT'S GRADE (circle one) K 1 2 3 4 5 6 7 8 9 10 11 12

PRESENT BUS NUMBER \_\_\_\_\_ AND STOP \_\_\_\_\_

REQUESTED SCHEDULE:

DAY	PICK-UP LOCATION	DROP-OFF LOCATION
MONDAY	_____	_____
TUESDAY	_____	_____
WEDNESDAY	_____	_____
THURSDAY	_____	_____
FRIDAY	_____	_____

EFFECTIVE DATE OF NEW SCHEDULE \_\_\_\_\_

PARENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

NOTE: ALTERNATIVE TRANSPORTATION REQUESTS WILL ONLY BE APPROVED FOR DESIGNATED AND ADOPTED BUS STOPS WITHIN THE INDIAN HILL SCHOOL DISTRICT.

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*(this portion for office use only)*

APPROVED	WAIVER ON FILE	DENIED
DRIVER ADVISED	BUS PASS ISSUED	PLEASE ADVISE DRIVER

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

COMMENTS \_\_\_\_\_