REQUEST FOR ALTERNATE BUSING  
School Year: 2021-2022

Purpose: Students who require busing from and/or to a daycare provider or other caregiver. Please note that your request can only be accommodated if the alternate address is within your elementary school district and only if space is available. We will not transport to more than one alternate caregiver.

Instructions: Please complete and return this form to your child’s school.

Alternate bus forms must be submitted by Monday, August 23, 2021 to be honored starting on Thursday, September 2, 2021.

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### Table

<table>
<thead>
<tr>
<th>Student’s Name:</th>
<th>First</th>
<th>Middle</th>
<th>Last</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade:</td>
<td></td>
<td></td>
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<tr>
<td>School:</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Parent/Legal Guardian:</th>
<th>First</th>
<th>Middle</th>
<th>Last</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>Number</td>
<td>Street</td>
<td>City</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date:</th>
<th>Telephone #:</th>
<th>(home)</th>
<th>(work)</th>
<th>Signature:</th>
</tr>
</thead>
</table>

If the following is a location other than the child’s normal residence, please complete:

- **A.M. Pick-up Location:**
  - Caregiver/Daycare Name
  - Caregiver/Daycare Address
  - Caregiver/Daycare Telephone Number
  - Check days to be picked up at above location: [ ] Monday [ ] Tuesday [ ] Wednesday [ ] Thursday [ ] Friday

  **Bus Company to Complete**
  Bus/Route #: ___________ Pick-up Location: _______________________________

- **P.M. Drop-off Location:**
  - Caregiver/Daycare Name
  - Caregiver/Daycare Address
  - Caregiver/Daycare Telephone Number
  - Check days to be dropped off at above location: [ ] Monday [ ] Tuesday [ ] Wednesday [ ] Thursday [ ] Friday

  **Bus Company to Complete**
  Bus/Route #: ___________ Pick-up Location: _______________________________

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**School/Office Use Only:**

Date Form Received: ____________________________

Approved: ____________________________ Date: ______________________

Business Manager/Principal

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