

**Armstrong School District
Transportation Department
Busing Request**

Please complete all the information that applies and return as soon as possible for approval to:

**Armstrong School District, Administration Office,
181 Heritage Park Drive, Suite 2, Kittanning, PA 16201
Attention: Mr. Jon Fair, Transportation Director
Phone 724-548-6014 Fax 724-548-7201**

Full Name of Child	School	Grade
Parent/Guardian Name:		Date of Request:
Address:		
City:	State:	Zip:
Home Phone:		Cell Phone:
Current Bus Number/Location (AM)		
Current Bus Number/Location (PM)		
Please check one:		
<i>New Student</i> <input type="checkbox"/> <i>School Bus Change</i> <input type="checkbox"/> <i>Bus Stop Change</i> <input type="checkbox"/> <i>Delete Student</i> <input type="checkbox"/>		
Give specific information/reason for request:		
Requested Bus Number/Location (AM)		
Requested Bus Number/Location (PM)		
Requested Start Date:		
If bus stop is at a babysitter or daycare, please give the following information:		
Name of babysitter/daycare:		
Address:		
City:	State:	Zip:
Phone:		

Office of Transportation use ONLY

Approved: <input type="checkbox"/>	Signature/Date:	
Location (AM):	Bus Number:	Time:
Location (PM):	Bus Number:	Time:
Start Date:		
Disapproved: <input type="checkbox"/> Reason:		

Original: Transportation Department

Copy to: Parent, School, Bus Contractor(s)

Approved changes will not take place until all parties have been notified