Request for Transportation Services T4 Mid Columbia Bus Company (Always Copy in Light Blue)

School		Date		
STUDENT INFORMATION				
Student NamePlease F	rint Grade	e Room Teac	her	
Home AddressStreet Ad	dress (No PO Box numbers)	City	Zip	
Home Phone	Other Phones			
BUS STOP INFORMATION				
PRIMARY Circle day(s) of the EXISTING STOP: M T W T	Ή F		M RT# PM RT#	
SECONDARY Circle day(s) of the EXISTING STOP: M T W T	Ή F		AM RT# PM RT#	
REQUEST A Circle day(s) of the NEW STOP: M T W T *(Requires MidCo approval)	Print Address of Requ	lested New Bus Stop	AM RT# PM RT#	
Notes KINDERGARTEN BUS RIDER CAN BE RELEASED TO: Print Name Phone # Print Name Phone #				
APPROVALS Note: Changes to this plan must be made in writing and signed by the Parent/Guardian.				
Note. Chang	es to this plan must be made in wi	ning and signed by the Pareni/Guardiar	l.	
Parent/Guardian ~ Signature	Date	Principal/Designee ~ Signa	ture Date	
Parent/Guardian ~ Print Name		*Head Bus Driver ~ Signatu	re Date	
☐ Enter T4 into SIS (Flag G35) ☐ Keep original T4 in school office notebook ☐ Send copy of T4 to MidCo at main Toledo/Burgess office		MidCo Instructions: Log T4 on driver check sheet Log T4 on dispatch check she Place duplicate T4 in route dri Follow T4 checklist and place	ver box	