

# Temporary Bus Change Authorization

(all information must be completed)

Date _____	Regular Bus Assignment: _____
	Request Change to Bus # _____
Child's Name: _____ / _____ (first) (last)	
Has permission to ride to: _____ (complete address)	_____
Phone number where Responsible adult may Be reached at bus time: _____	_____
Parent Signature: _____	_____

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