

**Transportation Department
Space Available Request**

975 S. Coleman
Tooele, Utah 84074
Ph. (435) 833-1916
Fax: (435) 833-1917

Student
Name: _____
Student's Legal
Residence Address: _____

Student Grade: _____ School Student Attends: _____

Requested Location Address: _____

Reason for Request: _____

Students will be picked up along current bus route. No new stops will be created.

No requests will be granted for less than 5 days a week. AM or PM only is acceptable.

Requests received for alternate custody will be granted with verification. Please submit this information in person at the time of request or your request will be denied.

Violation to the rules and regulations may terminate your bus privilege.

I understand that my student is not eligible for the requested bus. I also understand that if an eligible student moves into the area, my student may be required to give up his/her seat. If more requests are received than space is available, the Transportation Office will prioritize by students living the furthest away from assigned school.

Parent/Guardian Name: _____ Phone: _____

Parent/ Guardian Signature _____ Date: _____

The Transportation Department's goal is to accommodate as many students as can be safely transported. We do, however, have to evaluate our eligible rider counts before the remaining space on each bus can be filled. Please allow a minimum of two weeks to process. During the first of the school year this can take up to a month or longer. Your patience is greatly appreciated. When we have finished processing your request we will send a copy to the school and the student's home address.

Date Received _____ Denied/Date _____ Approved/Date _____

Bus # _____ Bus Stop Time _____ am _____ pm _____

Stop Location _____