



Integrity Student Transportation PPTSP School Bus Transportation Request Form

Start Date of Service: _____

Student Status (check one): New Student: ___ Change of Address/Phone/Ride Status: ___ Cancel Transportation: ___

Student Information (Parent/Guardian Complete All Information – One Form per Student)	
Student Ride Status (Check all that apply):	Days of Week (Circle all that apply)
Ride AM and PM: _____	Mon Tue Wed Thu Fri
Ride AM Only: _____	Mon Tue Wed Thu Fri
Ride PM Only: _____	Mon Tue Wed Thu Fri
Name of Attending School: _____ Grade: _____	
Student Name: _____ Birthdate: _____	
Address: _____ City: _____ Zip: _____	
Parent/Guardian: _____ Home Phone: _____	
Emergency Contact: _____ Contact Phone: _____	
E-Mail Address: _____ Weight (Pre-K/K/KG Only): _____	
<p>School bus stops will be made in accordance with South Carolina State Department of Education regulation and state law. Students will be assigned the closest bus stop to their home when possible. School bus stops must be no closer than two-tenths (2/10) of a mile apart, in a safe location and at least six hundred (600) feet visibility front/rear. Student should report to the assigned bus stop five (5) minutes prior to the scheduled bus arrival time. Discipline reporting procedures will follow the guidelines established by the school of attendance.</p> <p>No student in grades kindergarten or below will be left at a bus stop alone. A designated adult - eighteen (18) years of age or older - must be at the bus stop with the matching numbered parent card issued by the school/transportation to match the student tag number. In the event a designated adult is not present at the bus stop and/or do not have matching numbered parent card issued by the school/transportation, the driver will contact the transportation office, providing the student's tag number and return the student to the school. Parent will be billed for retuning student to school after the first occurrence each semester.</p> <p>It is the responsibility of the parent/guardian to assure the safety and conduct of the student prior to the arrival of the school bus to the assigned school bus stop for pick-up and after the school bus departs the assigned school bus stop for drop-off.</p>	
_____	_____
Parent/Guardian's Signature	Date

Transportation Use Only	
Bus Rt. No. _____	Bus Stop: _____ AM Time: _____ PM Time: _____
Employee Initials: _____	Car Seat Required Based on Weight (check one): Yes _____ No _____
Additional Comments: _____	

Return this request form to: **(877) 671-8842** or e-mail to: **registration@integritytransonline.com**
Note: School Bus Transportation Service is not assured without this Request Form