
REQUEST FOR ALTERNATE BUS STOP

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 20, United States Code, Section 921, *et seq.*

PRINCIPAL PURPOSE: To aid sponsors/parents/guardians in requesting an alternate bus stop for their dependents.

ROUTINE USES: To identify the information needed by the School Bus Office to evaluate and implement requests.

DISCLOSURE: Providing information is voluntary. Not providing information would impede and limit the ability of the School Bus Office to honor a request for an alternate bus stop.

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| SPONSOR/PARENT/GUARDIAN NAME | DATE OF REQUEST |
| UNIT/ORGANIZATION (Include APO Address) | WORK PHONE |
| QUARTERS ADDRESS (Street, City) | HOME PHONE |
| NAME(S) OF DEPENDENT STUDENTS INVOLVED IN THIS CHANGE | DATE CHANGE IS TO START |
| CURRENT PICK-UP BUS STOP AND DESTINATION SCHOOL | |
| CURRENT DROP-OFF BUS STOP (If different than pick-up location shown above) | |
| ALTERNATE PICK-UP ADDRESS | |
| ALTERNATE DROP-OFF ADDRESS (If different than pick-up location shown above) | |

SPONSOR/PARENT/GUARDIAN ACKNOWLEDGMENT OF THE CONDITIONS FOR REQUESTING AN ALTERNATE BUS STOP

I understand that the School Bus Office will honor my request when the following conditions are met:

- a) My dependent is enrolled in a DoDDS school in a category entitled to space required transportation (enrollment categories 1-3).
- b) The alternate location is within the commuting area for the school my dependent attends.
- c) A safe bus stop can be established within walking distance of the alternate location (Normally 1 mile for Kindergarten through Grade 6, 1 1/2 miles for Grades 7 through 12).
- d) The change is expected to be long term. I understand that frequent requests, or requests to change bus stops on a day-to-day basis (e.g. Monday, Wednesday, and Friday at one bus stop; Tuesday and Thursday at another) are not authorized.

(Signature of Sponsor/Parent/Guardian)