

**AVONDALE SCHOOL DISTRICT
TRANSPORTATION DEPARTMENT**

REQUEST FOR BUS STOP RELOCATION

All written requests are reviewed in order of receipt and if necessary by the Transportation Committee. No telephone requests will be accepted. It is our goal to respond within 10 business days upon receipt of a written request sent to:

Avondale School District Transportation
1435 ½ W. Auburn Road, Rochester Hills, MI 48309
Fax: (248) 537-6055.

Date of request: _____

Student(s) Name(s): _____

School(s): _____

I am requesting a change for my child's: Pick up Drop off Both

Reason for requested change: _____

Current stop location:

Proposed stop location:

Contact information (if transportation department needs to contact you regarding this request):

Name: _____

Address: _____

Phone Number(s): _____

Email address: _____

FOR TRANSPORTATION DEPARTMENT USE ONLY:

Date Received: _____

Reviewed By: _____

Request Approved on: _____

Effective Date: _____

Bus Stop alternate location: _____

Notification of: Parent _____ School _____ Driver _____

Request Denied on: _____

Reason for Denial: _____

Notified requestor by letter or personally on: _____ by: _____