

BPSB Transportation Family Hardship/Extenuating Circumstance Alternate Stop Request Guidelines and Request Form

A request to provide an approved alternate bus stop location for a student due to a Family Hardship / Extenuating Circumstance can be made to the BPSB Transportation Family Hardship/Extenuating Circumstance Committee. To be considered for a Family Hardship / Extenuating Circumstance, the following criteria must be met:

- 1) Student must meet the eligibility criteria for qualifying for school bus transportation as outlined in the Louisiana School Transportation Bulletin 119 and the BPSB Transportation Manual.
- 2) Alternate bus stop is on an existing route within the student's school attendance zone.
- 3) Space is available on the assigned bus covering the designated route of the desired alternate stop.
- 4) Alternate bus stop is not to a daycare business, local business, and/or private residential babysitting business where compensation for services is provided or required.

The BPSB Transportation Family Hardship / Extenuating Circumstance Committee will consist of the following:

- 1) School Administrator (Principal or designee)
- 2) BPSB Member Representative(s)
- 3) BPSB Transportation Supervisor (or designee)
- 4) BPSB Bus Driver Association Representative

For the beginning of the school year, the request for an alternate bus stop due to a Family Hardship / Extenuating Circumstance must be filed on the official BPSB Request for Student Transportation Family Hardship / Extenuating Circumstance Form and submitted to the BPSB Transportation Department prior to the third Monday in July preceding the opening of school for the designated school year.

For events that may evolve once the school year has started that require consideration for an alternate bus stop, the request for an alternate bus stop due to a Family Hardship / Extenuating Circumstance must be filed on the official BPSB Request for Student Transportation Family Hardship / Extenuating Circumstance Form and submitted to the school and the BPSB Transportation Department. Prior to the formal committee meeting the school principal or assistant principal has the authority to temporarily approve the request. The BPSB Transportation Department will convene the designated committee to consider the request with the understanding the student may have to continue to ride their originally assigned bus until the committee makes the final decision.

The decision of the BPSB Transportation Family Hardship / Extenuating Circumstance Committee is final. There will be no appeal provision provided to the parent related to the decision made by the committee.

BPSB Transportation Department reserves the right to suspend any or all services to alternate bus stops at any time. The parent/guardian listed on this agreement will be given a notification period of no less than five (5) days-of suspension of this service. Notifications may be in writing or by verbal contact from the school site, the school bus driver, or from the Transportation Department.

BPSB Transportation Family Hardship / Extenuating Circumstance

Alternate Stop Request Form

Date: _____

Student's Legal Name: _____

Date of Birth _____ Grade _____ School _____

Name of Parent/Legal Guardian: _____

Home Address (Residence of Record): _____

Telephone Numbers (home) _____ (cell) _____

(Father's work) _____ (Mother's work) _____

Father's Place of Employment: _____ Hours of work: _____

Mother's Place of Employment: _____ Hours of work: _____

Name of Resident at requested Alternate Stop: _____

Alternate Stop Residential Address: _____

Telephone Numbers (home) _____ (cell) _____

Alternate Stop preference: (please check appropriate selection) AM ___ PM ___ Both ___

Requested Alternate Stop Bus #: _____ Bus Driver: _____

REQUIREMENTS OF ELGIBILITY:

- **Student must meet the eligibility criteria for qualifying for school bus transportation as outlined in the Louisiana School Transportation Bulletin 119 and the BPSB Transportation Manual.**
- **Alternate Bus Stop is on an existing route within the student's school attendance zone.**
- **Space is available on the assigned bus covering the designated route of the desired alternate stop.**
- **Alternate Bus Stop is not to a daycare business, local business, and/or private residential babysitting business where compensation for services is required or provided.**

RATIONALE FOR REQUEST: PLEASE ATTACH A WRITTEN DETAILED EXPLANATION WITH SPECIFIC DETAILS AS TO WHY REQUEST IS NECESSARY.

IT IS THE RESPONSIBILITY OF THE PARENT TO SUBMIT THE REQUEST FORM AND ATTACHED LETTER TO THE SCHOOL OR THE BPSB TRANSPORTATION DEPARTMENT, 3228 BARKSDALE BLVD, BOSSIER CITY, LA. 71112.

Parent Statement

I hereby certify that the above information is correct. I understand that falsification of information will result in the revocation of the request approval. I further certify that if any of the above information changes during the current year, I will notify the BPSB Transportation Department. I also fully understand that the decision of the Transportation Family Hardship / Extenuating Circumstances Committee is final without the provision of an appeal.

Your signature indicates that you understand and agree to the procedures set forth in the BPSB Transportation Family Hardship / Extenuating Circumstance Request policy and guidelines and that you understand if the request is approved, it is for the current school year only.

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: _____ Date: _____

_____ Your request has been APPROVED.

_____ Your request has been DENIED.

Date: _____ Signature: _____