



Discretionary Transportation Application

RETURN COMPLETED FORM TO

First Student, Transportation Department

1601 Black Hawk Street, Waterloo, IA 50702 ♦ 319.291.4879

transportation@waterlooschools.org



APPLICATION FOR DISCRETIONARY SCHOOL BUS TRANSPORTATION

Under authority of Chapter 285 of the Code of Iowa, the Waterloo Community School District will provide transportation, or reimburse parents for all high school students residing more than three (3) miles from their designated high school; all middle school students residing more than two (2) miles from their designated attendance center; and all elementary students residing more than one (1) mile from their assigned attendance center.

Students who live under the above guidelines may apply for discretionary busing. Consideration will be based on space availability on the bus, on a regularly scheduled stop, and on a regularly scheduled route. Applications will be available beginning July 1st of the upcoming school year and reviewed in the order they are received. **Students on a Voluntary Transfer do not have the option to apply or receive a discretionary route/stop. Your application will automatically be denied.**

Discretionary transportation will not be available for at least the first month of school. During the school year, any request for transportation on a discretionary basis will require a minimum of 3 days for processing. This will provide time for the transportation staff to determine availability of space on existing bus routes.

Please complete this form and submit to First Student, 1601 Black Hawk Street, Waterloo, IA 50702, your student's school, or email the form to transportation@waterlooschools.org

Please review the district transportation handbook on the WCSD website www.waterlooschools.org for more guidelines.

Today's Date: _____

PARENT/GUARDIAN NAME: _____

PHONE: (Home) _____ (Work or Cell) _____

EMAIL: _____

ADDRESS: _____

STUDENT NAME: _____ GRADE: _____

SCHOOL OF ATTENDANCE (transport to/from school) _____

STUDENT NAME: _____ GRADE: _____

SCHOOL OF ATTENDANCE (transport to/from school) _____

STUDENT NAME: _____ GRADE: _____

SCHOOL OF ATTENDANCE (transport to/from school) _____

To School From School BOTH

Transportation Department Use ONLY

Date Received: _____

Request Denied (Reason) _____

Staff Initials _____

Request Approved A.M. Route # _____ A.M. Stop _____ A.M. Time _____

Request Approved P.M. Route # _____ P.M. Stop _____ P.M. Time _____

Date to Begin Transportation _____ Date to Stop Transportation _____

Date Parent Notified _____