

EAGLE COUNTY SCHOOLS
TRANSPORTATION DEPARTMENT
SPACE AVAILABLE TRANSPORTATION APPLICATION

In Accordance with School Board Policy JC and JC-E1, students who wish to transfer to their school of choice, may apply for available space on buses to be transported to their requested school of Transfer and or Variance.

- This form must be resubmitted **EVERY SCHOOL YEAR** due to changes in routes and student loads.
- No new stops or services will be implemented to accommodate Transfer/Variance students. Because no space will be created to meet requests, not all students requesting space may be accommodated. In the event there are more applications for available space than is actually available on a bus, the transportation department will follow section 5 of Policy JC under the Transfer/Variance Transportation section.
- Due to changes in student populations, programs, and other factors which affect the number of students riding the bus, approval to ride the bus on a space available basis may be revoked at any time.
- This form must be returned to the ECSD Transportation Department at 757 East 3rd St, Eagle CO or may be faxed to 970-328-4815 or emailed to: donna.long@eagleschools.net
- Applications are **accepted until September 7** of each school year. Notification of application approval will be made on or about **September 15th**. This date allows the department to stabilize the eligible pupil loads on our buses in order to establish how many seats may be available.

NO SPACE AVAILABLE STUDENTS SHALL BE ALLOWED TO RIDE A BUS UNTIL NOTIFIED THAT THEIR APPLICATION FOR AVAILABLE SPACE BUSING HAS BEEN APPROVED.

Riding the bus is a privilege and can be denied or revoked due to poor behavior, failure to follow the bus rules, or any action or inaction which impedes the safe operation of the bus. One parent warning may be issued before the student will lose transportation for the remainder of the school year.

Please Print Legibly

Student Name(s) _____ Grade _____ Date of Birth _____

_____ Grade _____ Date of Birth _____

_____ Grade _____ Date of Birth _____

Parent Name _____ Main Phone Number _____

Physical Address _____ Emergency Phone _____

City _____ Zip _____

School Attending: _____ From Home School _____

Bus Route # _____ Bus Stop Requested _____

Comments _____

If you are requesting consideration for more than one child and only one seat is available, do you wish to Reserve that seat? YES ___ NO ___

OFFICE USE ONLY

Date Received _____ Student ID# _____ Approved ___ NOT Approved _____

Reason _____ Date _____ Date Notified _____ By _____

Spoke to _____ AM bus _____ Time _____ PM Bus _____ Time _____