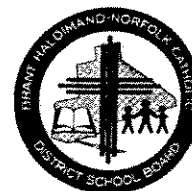




CO-OPERATIVE TRANSPORTATION SERVICES



349 Erie Ave, Brantford, N3S 2H7
Telephone: 519-751-7532 Toll Free: 1-877-279-7689
Fax: (519) 751-1536

Application for Courtesy Transportation

School: _____

Student Name: _____

Home Address/Location: _____

Home/Work Telephone: _____

School Use Only	
Route #	_____
Loading	_____
Eligible students	_____
Avail. Seats	_____

Briefly explain why courtesy transportation is requested:

Courtesy transportation is subject toall of the following conditions:

- Transportation will not be provided before October 1st
- No additional cost will be incurred by the Board
- Space must be available on an existing route
- Student must board on an existing route at an existing stop location
- Permission is granted during the current school year
- Permission to ride the bus may be withdrawn at ANY time if the seat is required by an eligible rider
- Riding privileges will be withdrawn for the remainder of the school year for acts of misconduct

I agree to the conditions for Courtesy Transportation and understand that the school Principal or the Transportation Supervisor has the right to remove my child from courtesy transportation upon 24 hours' notice. Should this occur, I will assume all responsibility to ensure my child's safe arrival at and departure from school.

Parent/Guardian Signature _____ Date _____



Courtesy Transportation From _____ to _____ Approved Not Approved
(Location) (Location)

Principal's Signature _____ Date _____