

SPECIAL AUTHORIZATION FOR SHARED-CUSTODY TRANSPORTATION

For SHARED-CUSTODY TRANSPORTATION, the schedule must be regular (i.e.: one week at one residence/one week at the other)
The Eastern Townships School Board is not obligated to transport a student to more than one address.

School Year: _____ School: **MASSEY-VANIER HIGH SCHOOL**

Name of Student: _____ Level: _____ Student ID#: _____

The care of the student listed above is shared equally by both parents (50% of the time with each parent).
I, the undersigned, hereby request school bus transportation as follows and understand that addresses will be verified:

CHILD'S PRINCIPAL ADDRESS: *Please check appropriate box to indicate parental designation*

PARENTAL DESIGNATION	PRINCIPAL ADDRESS
<input type="checkbox"/> MOTHER _____ Please print name clearly	_____ _____ _____
<input type="checkbox"/> FATHER _____ Please print name clearly	_____ _____ Telephone: _____

CHILD'S SECOND ADDRESS: *Please check appropriate box to indicate parental designation*

PARENTAL DESIGNATION	SECOND ADDRESS
<input type="checkbox"/> MOTHER _____ Please print name clearly	_____ _____ _____
<input type="checkbox"/> FATHER _____ Please print name clearly	_____ _____ Telephone: _____

_____ Date _____ Signature of Parent _____ Telephone number where I can be reached during the day

This form must be submitted to the School ANNUALLY whenever transportation is requested in situations of Shared-Custody. Failure to return this form may result in the suspension of school bus transportation to one of the two Shared-Custody addresses.