

Riding a different bus home is permissible for child care purposes only.

Cobb County School District
STUDENT BUS PASS



Please bring to the office for approval first thing in the morning.

(Make sure child care provider permission note is included.)

Student: _____ **Teacher:** _____

Gender: M or F **Age:** _____ **Grade:** _____ **New Student:** _____

Reason for Pass: _____

Duration of Pass: _____ **Today's Date:** _____

Requested Stop Location: _____

Assigned Bus #: _____ **Temporary Bus#:** _____

Home Address: _____

Apt/Subdivision: _____

Parent/Guardian: _____

Home #: _____ **Cell #:** _____

Medical Conditions: _____

Parent Signature: _____

Administrative Approval:

Name: _____ **Signature:** _____

CCSD Transportation Department reserves the right to deny permission of temporary riders based on capacity limits and student behavior concerns.