

## 2025-26 TRANSPORTATION APPLICATION FOR NON-ELIGIBLE STUDENTS

All Transfer Requests are approved with the understanding that transportation is the parents'/guardian's responsibility. However, from time to time some of the Prigge's buses have available space. In these situations, the school district may be able to provide transportation for your child. Approval of Applications would be on a year-to-year basis and would have to comply with the conditions set forth below.

- 1. Applications will be accepted at any time during the school year. The Transportation Department will require three weeks to process your request. Parents/guardians will receive a written response to their request.
- Requests for transportation will only be approved if there is <u>no additional cost</u> to the Sheboygan Area School District.

The following criteria will apply:

- a. The district will not re-route a bus to accommodate the request.
- b. Only existing bus stops will be used.
- c. Space availability will be determined by assigned ridership for programs/schools.
- During the course of a school year if the bus your child has been assigned becomes filled beyond capacity of the bus, your child will no longer receive transportation and parents/guardians will receive three weeks advance written notification of that fact.
- 4. If your child is assigned to a bus stop that at some point is no longer needed for a bus eligible student, we will attempt to move your child to the nearest bus stop to your original request. Please note if this happens and there is not a bus stop available, your child will no longer be able to receive transportation and parents/guardians will receive three weeks advance written notification of that fact.
- 5. All applications received in the Transportation Office will be considered for approval. Applications will be processed on a first come, first serve basis.
- 6. Applications are required each school year.

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DIRECTIONS: Please read and agree to the criteria on the reverse side. Then complete this form in its entirety.

This form is only for students who have been approved for transfer to a school outside of their attendance

School (2025-26)			Date	
Name of Student			Grade	
	Last	First		(2025-26)
Name of Student			Grade	
	Last	First		(2025-26)
Name of Parent/Guard	dian		Phone	
Home Address Inform	ation:			
			House Number and	l Street
Requested pickup/dro	p off address or ne		City and Zip Code	
Please check <u>ONE</u> of I am requesting both to	_	bus service.		
I am requesting to sch I am requesting from s	ool bus pickup onl	у		
Received <b>2024-25</b> trar	nsportation from <b>th</b>	is school under this pr	ocess?: YesNo	0
understand that if this on the reverse side. F	request is approve further, I understar bus, my child will	e read and understand thed, my child will be grantend that if the bus my child no longer receive free tr	ed transportation ac I has been assigned	cording to the criteria d becomes filled
Parent/Guardian Signa	ature			
Please return this to ve	our school secreta	rv who will forward it to the	ne Transportation O	)ffice

Alternatively, you may return this directly to the Transportation Office, 3330 Stahl Rd, Sheboygan, WI

53081 or by email: transportation-services@sasd.net