

# WCPSS - Joint Custody Dual Bus Stop Request Form 2024 – 2025

## Form for Internal School Use Only

To be completed upon school administration approval.

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Name

\_\_\_\_\_  
Student's Last Name

\_\_\_\_\_  
Student's First Name

\_\_\_\_\_  
Students WCPSS ID Number

\_\_\_\_\_  
Student's Grade

I verify that the information below is correct:

- I have verified that there is dual custody
- I have verified both parent addresses
- I have verified that there are processes and structures in place to support a dual bus/dual bus stop
- I have verified that no extenuating conditions exist to interfere with a dual bus/dual bus stop

\_\_\_\_\_  
School Official

\_\_\_\_\_  
Position

\_\_\_\_\_  
Date

- I understand that in order to be approved the request must meet all the requirements of board policy pertaining to alternate stop requests including both parents resident in the base district, both stops are along an existing route, and there is existing capacity on the bus for the second stop.
- I understand that I need to be readily available via reliable communications means.
- I understand that if approved, the schedule cannot be changed for the remainder of the year, unless a court order changes the terms of custody. I must be prepared to transport my child when temporary adjustments to the dual custody schedule are needed.
- I understand that I will submit all changes in custody arrangements in writing to the school in a timely manner.
- I understand that the assigned dual bus stops are only for the current school year.
- I understand that I may contact the principal and revoke this agreement at any time.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Cell Phone Number

\_\_\_\_\_  
Parent E-mail Address

\_\_\_\_\_  
Parent/Guardian Address

le:

\_\_\_\_\_  
Monday

\_\_\_\_\_  
Tuesday

\_\_\_\_\_  
Wednesday

\_\_\_\_\_  
Thursday

\_\_\_\_\_  
Friday

- I understand that in order to be approved the request must meet all the requirements of board policy pertaining to alternate stop requests including both parents resident in the base district, both stops are along an existing route, and there is existing capacity on the bus for the second stop.
- I understand that I need to be readily available via reliable communications means.
- I understand that if approved, the schedule cannot be changed for the remainder of the year, unless a court order changes the terms of custody. I must be prepared to transport my child when temporary adjustments to the dual custody schedule are needed.
- I understand that I will submit all changes in custody arrangements in writing to the school in a timely manner.
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\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Cell Phone Number

\_\_\_\_\_  
Parent E-mail Address

le:

Monday	Tuesday	Wednesday	Thursday	Friday		
Si necesita servicios de traducción gratuitos para comprender los procesos escolares, llame al (919) 852-3303	إذا كنت بحاجة إلى خدمات الترجمة المجانية للتعرف على سير العمليات بالمدرسة، اتصل بالرقم (919) 852-3303	Si vous avez besoin de services de traduction gratuits pour comprendre les procédures scolaires, appelez le (919) 852-3303	यदि आपको विद्यालय की प्रक्रियाओं को समझने के लिए निःशुल्क अनुवाद सेवाएँ चाहिए, तो (919) 852-3303 पर कॉल करें	학교/교육 과정에 관한 무료 번역 서비스가 필요하시면 다음 번호로 연락하여 주십시오 (919) 852-3303	Nếu quý vị cần sự thông dịch miễn phí để hiểu phương pháp trường học, xin vui lòng gọi số điện thoại (919) 852-3303	如果您需要免费翻译服务来了解学校流程，请致电 (919) 852-3303