

BUS PROCEDURE FORM
John Lyman School
SY 2011 – 2012
DATTCO 349-8479/BASREP 349-1819

Bus drivers operate at all times with the safety of the students in mind. Occasionally, when a bus arrives at a scheduled stop at the end of the day, a parent or other adult is not present. This creates a difficult and confusing situation for the driver and sometimes for the parent who may be running late. In this rare situation, we need to know what action you would like the driver to take. Please check your choice below, sign the form and return it to your child's school by **Tuesday, September 6, 2011**. Please be sure you also discuss this plan with your child so that he or she is aware of what will happen and will understand why the driver is taking this action.

Thank you,

Karen M. Brimecombe
Principal

Please detach the bottom portion and return. Keep the top portion for your information

John Lyman School – Bus Procedure Form
Grade 3 & Grade 4
2011-2012

In the event no designated adult is at my child's scheduled bus stop, I would like the driver to take the following action: **(Please check one)**

_____ Leave my child at the **bus stop** because I have established a plan for him/her to follow which will provide for supervision and ensure his/her safety.

_____ Bring my child to **BASREP** (The Before and After School Recreation Enrichment Program), at Korn School, where I will pick him/her up, as soon as possible. I also understand that if my child is brought to BASREP more than once, I will be required to register my child in the program, and pay all applicable fees. The program's phone number is 349-1819.

Should you arrive late to the bus stop or your home, and your child is not there, please call DATTCO Bus at 349-8479 to determine if your child is on the way to Korn. If your child has been taken to Korn, please call the after school program (349-1819) to let the staff know when you will pick up your child. The program closes promptly at 6:00 P.M.

Child's Name: _____

Parent's Name: _____ Grade : _____

Parent Signature: _____

Phone: _____ Teacher: _____

***PLEASE COMPLETE AND RETURN THE ATTACHED BASREP INFORMATION FORM