

# TRANSPORTATION REQUEST FORM

Purpose of Request:  Returning Student  New Student  Address Change  
 Network Transfer (requires proof of residency)  
From School: \_\_\_\_\_ to School: \_\_\_\_\_  
 Other (state purpose): \_\_\_\_\_

School/Campus:  Akron Preparatory  Broadway Academy  
 Chapelside Academy  Cleveland College Preparatory  
 East Academy  Euclid Preparatory  
 Lake Erie Preparatory  Lincoln Park Academy  
 NE Ohio College Preparatory K-8  NE Ohio College Preparatory High School  
 Ohio College Preparatory  University of Cleveland Preparatory  
 West Park Academy  
 Other (please specify): \_\_\_\_\_

Full Name of Parent/guardian: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

<u>Student Name</u>	<u>Date of Birth</u>	<u>Gender</u>	<u>Grade</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Closest Intersection/Cross Street to your home: \_\_\_\_\_

- Yes, My student(s) **will** use the Yellow Bus Transportation provided by ACCEL Schools.  
 No My student(s) **will not** use the Yellow Bus Transportation provided by ACCEL Schools. I assume all responsibility in transporting my student(s) to and from school each day.

**Please Note:** If you move during the School Year, a new Transportation Form must be filled out to change your route stop. Please allow five (5) Business Days for Processing.

## COMPLETING THIS FORM DOES NOT GUARANTEE TRANSPORTATION

THIS SECTION TO BE COMPLETED BY TRANSPORTATION DEPARTMENT		
Date Reviewed: _____	Date Completed: _____	PowerSchol Updated: _____
Request Status: <input type="checkbox"/> Approved <input type="checkbox"/> Declined <input type="checkbox"/> Waitlist		
Bus Information: Route: _____ Stop: _____ Start Date: _____		
Denial Reason: <input type="checkbox"/> Live within 1 mile or greater than 5 miles of school <input type="checkbox"/> Bus stop unavailable		
<input type="checkbox"/> Other: _____		