



# SYRACUSE CITY SCHOOL DISTRICT

Anthony Q. Davis, Superintendent of Schools

Transportation Department

Jeremy C. Smith, Director

## STOP CHANGE REQUEST FORM

School \_\_\_\_\_ Date \_\_\_\_\_

Current Stop \_\_\_\_\_

Proposed Stop \_\_\_\_\_

Reason \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

### Student Name(s):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Approved

Denied because:

- Other students at stop
- Within 2 blocks
- Police Matter

\_\_\_\_\_  
Transportation Administrator Signature

\_\_\_\_\_  
Date

**NOTE: SCHOOL, PLEASE NOTIFY PARENT OF DENIAL**