



LEON COUNTY SCHOOLS TRANSPORTATION

SCHOOL BUS INFORMATION FORM

Dear Parents:

Our Transportation Department has the complex job of transporting approximately 15,000 children to and from school each day. Our main goal is to transport the children of Leon County in the safest and most efficient manner possible. In order to do this, it is necessary that we request your assistance in several areas.

- 1. It is important that certain information on pupil riders be maintained in the Transportation Department. Please complete the parent's section of this form and return it to your child's bus driver immediately.
2. We urgently request that you speak with your child about SAFETY AT THE SCHOOL BUS STOP and ON THE SCHOOL BUS and how dangerous areas can be. A disturbance on the bus could distract the driver. Please discuss the SCHOOL BUS RULES, listed below.
3. Please monitor your children at their BUS STOP. Discuss with your child(ren) what to do if they miss the bus. Teach your child(ren) that they share in the responsibility for their lives. If you don't meet your child(ren) at the bus stop, make sure they know to come straight home and not speak, or go near any strangers.

SCHOOL BUS RULES-ALL STUDENTS WILL:

- 1. OBEY THE DRIVER AND FOLLOW ALL LCSB RULES/POLICIES.
2. SIT IN PLACE AND TALK QUIETLY.
3. KEEP HANDS, ARMS, FEET AND OTHER OBJECTS TO THEMSELVES. (NO PETS/ANIMALS PERMITTED ON THE BUS)
4. NO EATING, DRINKING, CHEWING GUM OR USE OF ALCOHOL OR TOBACCO PRODUCTS.
5. NO "FOUL" LANGUAGE OR RACIAL SLURS.

Discipline Procedures:

The driver will issue verbal warnings for all minor offenses and note them in the driver's log. Written bus referrals will be acted upon by the school administration. Any second or subsequent written referrals may be treated at the next higher level regardless of the nature of the offense. Please be aware that video surveillance and audio equipment has been installed on every bus.

BUS DRIVER'S NAME \_\_\_\_\_ BUS # \_\_\_\_\_ SEAT # \_\_\_\_\_

\_\_\_\_\_  
FIRST NAME MIDDLE NAME LAST NAME

ADDRESS: \_\_\_\_\_

WORK #: \_\_\_\_\_ HOME #: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_\_

MEDICAL CONDITION (IF ANY): \_\_\_\_\_

BUS STOP LOCATION: A.M.: \_\_\_\_\_

P.M.: \_\_\_\_\_

PARENT OR GUARDIAN SIGNATURE: \_\_\_\_\_