



**Skokie School District 68**  
Parent Request for Stop Location Change

Stop change requests are to be made on an annual basis and should only be made to existing stops. Requests will be reviewed and a determination will be made on a case by case basis.

Student's Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_

Current Bus Stop: \_\_\_\_\_ Bus # \_\_\_\_\_

Requested Bus Stop: \_\_\_\_\_ Bus # \_\_\_\_\_

Reason for Change: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The parent agrees that they are responsible for their child(ren)'s safety to and from the newly assigned bus stop location.

Parent Name: \_\_\_\_\_

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

Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Received \_\_\_\_\_ Authorized: \_\_\_\_\_ Date: \_\_\_\_\_

New Bus Stop Location: \_\_\_\_\_ Bus # \_\_\_\_\_

Effective Date: \_\_\_\_\_ Pass Mailed: \_\_\_\_\_ Picked Up: \_\_\_\_\_ To School \_\_\_\_\_

Open Enrollment Student: Yes \_\_\_\_\_ No \_\_\_\_\_