



349 Erie Avenue Brantford, ON, N3T 5V3  
 Phone: 519-751-7532 Toll Free: 1-877-226-6353 Fax: 519-751-1536  
 www.stsbhn.ca

**Special Transportation Request**

**TF039**

<b>STUDENT INFORMATION:</b>	START DATE	/	/	END DATE	/	/
		YYYY / MM / DD			YYYY / MM / DD	

<b>SURNAME:</b>		<b>GIVEN NAME:</b>	
<b>SCHOOL:</b>			<b>D.O.B.:</b>
			YYYY / MM / DD
<b>HOME ADDRESS:</b>			<b>ON</b>
	Street # / Street Name	Town	Province Postal Code
<b>TELEPHONE:</b>		<b>EXCEPTIONAL PUPIL:</b>	NO <input type="checkbox"/> YES <input type="checkbox"/>

TRANSPORTATION REQUEST	COST	RATIONALE
<input type="checkbox"/> School Bus		<input type="checkbox"/> Alternate Placement
<input type="checkbox"/> School Bus (purchase)		<input type="checkbox"/> Behaviour
<input type="checkbox"/> Rider Aide		<input type="checkbox"/> Distance / Time
<input type="checkbox"/> Special (Lift Bus)		<input type="checkbox"/> Medical
<input type="checkbox"/> Individual Transport		<input type="checkbox"/> Temporary
<input type="checkbox"/> Parent		<input type="checkbox"/> Modified Day
<input type="checkbox"/> Other (Specify Below)		

**COMMENTS:** ex. Needs, Grade / Program Requirements, etc.

**Note:** Please attach the doctor's note if request is for medical reasons.

**REQUESTED BY:**

Principal / Principal Leader Special Education