

STUDENT TRANSPORTATION OF PEEL REGION

STOPR

TFL004

COURTESY SEAT

| STUDENT NAME/GRADE | ADDRESS PHONE # | SCHOOL |
|--------------------|-----------------|--------|
| | | |

We, the undersigned, acknowledge that the above named is ineligible for school bus transportation according to STOPR procedure. We further acknowledge that transportation for this student is provided only because vacant seats currently exist on the school bus appropriate to this student.

We understand and agree that bus privileges may be removed at any time as the result of increased seating requirements for eligible transportation students. We further understand and agree that transportation privileges, on this basis, are extended on a temporary basis only, subject to seating availability for eligible students and that students taking advantage of this privilege must utilize existing bus stop locations only.

Transportation privileges extended as per this acknowledgement form will expire no later than June 30th, of the current school year.

I have received the information regarding the Courtesy Seat policy for students.

| STUDENT NAME | PARENT SIGNATURE | DATE |
|--------------|------------------|------|
| | | |