



## EXTENDED DAY / TUTORIAL/TWILIGHT/CREDIT RECOVERY 2016 – 2017 TRANSPORTATION PERMISSION SLIP

The following Permission Slip must be completed and signed by a parent or guardian and returned to the school principal before a Metro School Bus can transport your child to participate in extended day programs at school. The school will forward a copy of this form to the Department of Transportation. The Department of Transportation will need three (3) school days to process this request prior to your child receiving extended day transportation services. **The address must match what the school has on file and your student must be zoned to this school for us to assign them to an evening bus.**

**PLEASE PRINT**

STUDENTS SCHOOL ID #: \_\_\_\_\_

STUDENTS NAME: \_\_\_\_\_

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

PARENT/GUARDIANS NAME: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ EMERGENCY PHONE: \_\_\_\_\_

SCHOOL CHILD ATTENDS: \_\_\_\_\_

PROGRAM: \_\_\_\_\_

My child has permission to ride a Metropolitan Nashville Public Schools School Bus from school to my **child's regular bus stop after school** to participate in extended school day activities. I understand that my child may be enroute on the school bus in excess of one (1) hour. I understand that transportation services may not be provided for my child if we reside in a walk zone. I further understand that services will not be provided on early release school days, snow day, or any other day school is not in session. My child and I understand that this service is a **privilege**, and further understand that bus service will be discontinued should my child misbehave or violate school system's safety rules. My child and I have read the attached Bus Rider Rules and agree to abide by them.

Parent/Guardians Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### School will keep original form for files

\*\*\* For TWILIGHT ONLY\*\*\*

Beginning Date: \_\_\_\_\_ End Date \_\_\_\_\_

Administrator approving hardship transportation for Twilight Program

Signature \_\_\_\_\_