

Transportation Location Change Form

BOE Policy EEA allows a maximum of two consistent A.M. pick-up locations and two consistent P.M. drop-off locations. Transportation to/from places of business is prohibited. **COMPLETE ONE FORM PER STUDENT.** Please allow 10 working days for processing. Service will begin after you receive notice from the WCPS Transportation Department. **TLC forms are only valid for the current school year. A new TLC form is required for each subsequent school year.**

PARENT INFORMATION			
Parent Name:	<input style="width: 95%;" type="text"/>	Home Phone:	<input style="width: 95%;" type="text"/>
Street Address:	<input style="width: 95%;" type="text"/>	Cell Phone:	<input style="width: 95%;" type="text"/>
City:	State:	Zip:	Work Phone:

STUDENT INFORMATION: ONLY ONE STUDENT PER FORM	
Student Name:	<input style="width: 95%;" type="text"/>
Grade:	<input style="width: 95%;" type="text"/>
School:	<input style="width: 95%;" type="text"/>
A.M. Pick-Up #1	Address: <input style="width: 90%;" type="text"/> Contact at Address: <input style="width: 90%;" type="text"/> Phone: <input style="width: 95%;" type="text"/>
A.M. Pick-Up #2	Address: <input style="width: 90%;" type="text"/> Contact at Address: <input style="width: 90%;" type="text"/> Phone: <input style="width: 95%;" type="text"/>
P.M. Drop-Off #1	Address: <input style="width: 90%;" type="text"/> Contact at Address: <input style="width: 90%;" type="text"/> Phone: <input style="width: 95%;" type="text"/>
P.M. Drop-Off #2	Address: <input style="width: 90%;" type="text"/> Contact at Address: <input style="width: 90%;" type="text"/> Phone: <input style="width: 95%;" type="text"/>

Each box must contain a #1 or #2 pick-up/drop-off location. The schedule must remain the same every week.

EXAMPLE DAY:		Monday		Tuesday		Wednesday		Thursday		Friday	
A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.
2	1										

Parent Signature: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
<i>(I understand that this request applies only for the current school year.)</i>	

Submit this form to the WCPS Transportation Department via email at wcpstransportation@wcps.k12.md.us or fax at 301-766-2911

For TRANSPORTATION DEPARTMENT Use Only:	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied – Comments/Reasons: <input style="width: 80%;" type="text"/>
A.M. Bus #1:	Stop Location: <input style="width: 80%;" type="text"/>
A.M. Bus #2:	Stop Location: <input style="width: 80%;" type="text"/>
P.M. Bus #1:	Stop Location: <input style="width: 80%;" type="text"/>
P.M. Bus #2:	Stop Location: <input style="width: 80%;" type="text"/>
Transportation Administrator: <input style="width: 60%;" type="text"/>	Effective Date: <input style="width: 35%;" type="text"/>