Dear: PARENTS AND BUS RIDERS,

North Central runs all of our busses close to the maximum allowed capacity. If you are planning to utilize bus transportation, we would like to remind you of a few rules and guidelines. These guidelines are put in place to allow for your child’s safety as well as to provide our bus drivers with necessary information pertaining to your child’s bus pick-up and/or bus drop-off locations.

3301-83-13 (B5) Ohio law states: “Each pupil shall be assigned and required to use a specific school bus stop except in unusual circumstances as approved by the school bus owner designee.”

Due to the past few school years, North Central will be changing the way that we manage the bus pick-up and/or bus drop-off of students. With the amount of bus notes and phone calls that have come through our offices with changes to bus pick-up and/or bus drop-off locations, it has been determined that this is becoming an unsafe practice for our students as well as the transportation department.

Each student will now only be allowed to have one bus pick-up and one bus drop-off location. What this means is that if you have your child go to the babysitter on the first day of school, then they will have to go there the rest of the year. If you happen to be home from work early your child will still have to go to the babysitters. It will be your responsibility to pick your child up at that location. If your child goes home after school, then he or she will have to go there every day after school. Again, this is for the SAFETY of our students and our transportation department. We understand that emergencies may arise and that you may have to call the school to make other arrangements.

If you have to make a permanent change in your child’s bus pick-up and/or bus drop-off locations, then we will look at the situation at that time.

Again, we apologize for this inconvenience, but please keep in mind the SAFETY of your child and the Laws of transportation.

Please feel free to contact me if you have any questions in regards to this matter at hand.

Thank you.

Yours in safety,

Eric Moreland
North Central Local School, Transportation Supervisor
(419)737-2346 (w) or emoreland@northeasternschool.org

Providing Educational Services for communities of: Bridgewater, Bridgewater Center, Jefferson East, Jefferson West, Holiday City, Kunkle, Lake Seneca, Madison and Millcreek Townships and Pioneer
North Central Local School District
Transportation/Alternate Request

Please complete this form if you are asking for your child to be picked up or dropped off at your address or at any address other than your place of residence, OR, if your child does not require bus service. You can return the completed form to any building office, email it to emoreland@northcentralschool.org or fax it to 419-737-3361. If your request is approved your child will bring home a paper with the appropriate bus change information.

- Student Name ___________________________ Grade/Room ___________________________
- Home Address ___________________________ Home Phone ___________________________
- Parent’s Name ___________________________ Cell Phone ___________________________
- Parent Email ___________________________ Parent Work Phone ___________________________

Check here if student does not require AM bus service. [ ]
Check here if student does not require PM bus service. [ ]

**AM Pick-up Location**
Name of responsible party ___________________________ Phone ___________________________
Address ___________________________ City ___________________________

**PM Drop-off Location**
Name of responsible party ___________________________ Phone ___________________________
Address ___________________________ City ___________________________

*Parent Signature ___________________________

*Requested Beginning Date: ___________________________

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For Office Use Only

Approved ________ Not Approved ________ Date Received ___________
Notes ___________________________________________

Adopted: ___________________________ Beginning Date ___________________________
North Central Local School District
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Name of responsible party __________________________ Phone __________________________
Address __________________________ City __________________________

**PM Drop-off Location**
Name of responsible party __________________________ Phone __________________________
Address __________________________ City __________________________

**Parent Signature**

**Requested Beginning Date:** __________________________

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Name of responsible party __________________________ Phone __________________________
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*Requested Beginning Date: __________________________

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