**REQUEST FOR JOINT CUSTODY BUSING ARRANGEMENT**

NAME OF STUDENT(S): Click or tap here to enter text. DATE: Click or tap to enter a date.

SCHOOL: Choose an item. GRADE: Choose an item.

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

Mothers Name: Click or tap here to enter text. Cell Phone: Click or tap here to

Mothers Address: Click or tap here to enter text. Work Phone: Click or tap here to

Fathers Name: Click or tap here to enter text. CellPhone: Click or tap here to en

Fathers Address: Click or tap here to enter text. Work Phone: Click or tap here to e

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ALTERNATING WEEKS: YES [ ]  NO [ ] IF YES, WHAT IS THE STARTING DATE:Click or tap here to

IF NO, SPECIFY DAYS: MON AM TUE AM WED AM THU AM FRI AM

(M-MOM or D-DAD) MON PM TUE PM WED PM THU PM FRI PM

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Both parents MUST sign the form. It is the parents responsibility to be sure their student know which address to go to on a daily basis.

Both addresses MUST be in Novi Community School District Boundary and be registered with the district. Elementary students can only be transported from their elementary attendance area.

MOTHERS SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: to enter text.

FATHERS SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: to enter text.

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DEPARTMENT USE ONLY:

 MOM BUS: \_\_\_\_ DAD BUS: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: