Long Branch Public Schools ● Transportation Department

540 Broadway • Long Branch, NJ 07740 • phone: 732-571-2868 ext 40080/82 • fax: 732-571-4268

send application to: ibottino@longbranch.k12.nj.us & sbennett@longbranch.k12.nj.us

In-District Special Education Transportation

Transportation Start Date:_____ ______School:______ Grade:_____ Student's Home Address: *Do not forget to include apartment # if applicable Parent/Guardian: Phone # () -Transportation to/from HOME: A.M. only ____ P.M. only ____ A.M & P.M ____ Transportation to/from SITTER: A.M. only ____ P.M. only ____ A.M & P.M____ Sitter's Address: ______ Long Branch, NJ 07740 Sitter's Name: ______ Sitter's #: (________ SPECIAL EDUCATION STUDENT INFORMATION Transportation Required as part of students IEP? YES_____ NO____ Allergies?____ Does student qualify for Extended School Year (ESY) services? YES_____ NO____ If yes, to what? Does student require a Curb-to-Curb bus stop? YES_____ NO____ Can student be routed at a Group/Corner stop? YES_____ NO____ Can student ride a REGULAR ED BUS if mileage requirement is met? YES_____ NO____ If 3rd Grade+ can student be let off P.M. bus without an adult present? YES_____ NO____ Is HARNESS/VEST required? YES_____ NO____ Diabetic?____ Student's Case Manager:_____Ext:____ ___________ STUDENT: _____ School: ____ Grade: ____ Are there any special requirements?/Important Information that will be helpful to safely and effectively transport this student to school? Seat Student Behind Bus Driver____ Seat Student Next to Bus Aide____ Student Requires 1:1 Aide_____ If possible, p/u student last _____ If possible, d/o student first_____ Electronic Device(s) Permitted _____

TRANSP OFFICE WILL GIVE BUS DRIVER & AIDE THIS SECTION

BUS ROUTE(S): _____