



SYRACUSE CITY SCHOOL DISTRICT

Jaime Alicea, Superintendent of Schools

Transportation Department

Theresa Kuss, Director

One Day Emergency Bus Pass for Curb to Curb Students

Call your Analyst for bus information

NOTE: THIS FORM IS NOT TO BE USED FOR CORNER TO CORNER BUS STOPS

School: _____ Date: _____

Student's Name: _____

Bus Stop: _____

Route #: _____

Name & Phone Number of Person Receiving Student

(This person must be present at the door of the bus before the student can be dropped off.)

Name: _____ Phone #: _____

Reason for Emergency: _____

School Administrator/Designee Signature: _____

Please FAX this form to The Transportation Center and give a completed copy to the driver.

Fax Number: 315-435-5854

kab 7/2017