**HARLOWS SCHOOL BUS SERVICES - PARENT/STUDENT BUS CONTRACT**

**All students must complete this form, even if you are a regular rider. This will apply to all activities and field trips.**

*Safety is #1 – If the driver is concerned for the safety of any child at a stop, the child will be transported back to the school and parents will be notified.*

Parents, please have student(s) at the bus stop 5 minutes prior to stop time.

**Behaviors to Correct:**

\_\_Destroying Property \_\_ Lighting Matches, Lighter, Vaping/Smoking

\_\_ Bringing injurious/objectionable items aboard \_\_ Spitting or Littering

\_\_Damaging Bus Equipment \_\_ Leaving / Standing in seat area

\_\_ Disobeying Driver \_\_ Tripping/Pushing Others

\_\_ Rude, Discourteous, Noisy, or Annoying \_\_ Hanging out the window

\_\_ Improper boarding/departing procedures \_\_ Throwing items from bus

\_\_ Unacceptable Language \_\_Fighting (2 weeks)

\_\_ Other Improper Behavior \_\_ Keep Aisle Clear /Arms and legs inside seat

 \_\_Remain seated until bus has completely stopped

 \* Night travel will require assigned seating

**Consequences may include:**

**First Conduct Report:** Conference with Principal

**Second Conduct Report**: Warning of 3-day suspension of bus transportation

**Third Conduct Report**: 3-day suspension of bus transportation

**Fourth Conduct Report**: 5-day suspension of bus transportation

**Fifth Conduct Report**: Total suspension of bus transportation for semester or year

\*Acknowledge that you have read and understand the rules and policies with your student(s), please complete and sign below\*

Student Name(s): Grade: Route #:

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Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emergency Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physical Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any additional information you would like the drivers to know on the reverse.

Sandra Hays, Transportation Manager Boulder 406-225-3344 Ralph Jones, Transportation Manager Whitehall 406-287-3461