

**ST. MARY'S COUNTY PUBLIC SCHOOLS**  
**DUAL CUSTODY TRANSPORTATION REQUEST FORM**  
(Must be approved and signed by the Site Administrator)

This form is to be used by parents/guardians to request bus transportation for a student that has a custody arrangement that requires the student to alternate between addresses on a daily or weekly basis. For example; a dual custody situation where a student alternates between two parents/guardians from week to week. Another example; a dual custody situation where a student resides with one parent/guardian Monday-Thursday, but goes home on Fridays to the other parent/guardian's house. **These arrangements must be scheduled on a consistent basis, and can NOT be used "as needed"**. Both parents/guardians must reside in the district boundary of the student's school.

STUDENT NAME: \_\_\_\_\_ STUDENT ID: \_\_\_\_\_  
SCHOOL: \_\_\_\_\_ STUDENT GRADE: \_\_\_\_\_  
PARENT/LEGAL GUARDIAN NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_ REQUESTED START DATE: \_\_\_\_\_

**PARENT/GUARDIAN ADDRESS # 1:**

Name of responsible adult at address: \_\_\_\_\_  
Five Digit Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: MD Zip Code: \_\_\_\_\_

**PARENT/GUARDIAN ADDRESS # 2:**

Name of responsible adult at address: \_\_\_\_\_  
Five Digit Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: MD Zip Code: \_\_\_\_\_

Explain the reason for this request and outline the schedule that your student will be at each of the two addresses:

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The student is responsible for knowing his/her schedule and utilizing the appropriate bus and bus stop in the afternoon. The school is responsible for ensuring that the student boards the correct bus in the afternoon. The Site Administrator may deny a request if he/she does not receive adequate documentation of the custody arrangements or if the arrangements are too complicated to appropriately manage.

PARENT/LEGAL GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SITE ADMINISTRATOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**STAFF USE ONLY**

Address # 1: BUS: \_\_\_\_\_ BUS STOP: \_\_\_\_\_

Address # 2: BUS: \_\_\_\_\_ BUS STOP: \_\_\_\_\_

Updated: 6/24/16

Original copy should remain at the student's school

Cc: Parents/Legal Guardians, Bus Drivers, Department of Transportation