

GATEWAY REGIONAL SCHOOL DISTRICT
12 Littleville Road
Huntington, MA 01050
(413) 685-1016 Telephone
(413) 667-8739 Fax

Dr. David Hopson
Superintendent

Stephanie Fisk
Business & Financial Officer

SPLIT CUSTODY TRANSPORTATION REQUEST FORM
2015-2016

Student Name: _____ Grade: _____

Home Address: _____ Parent Phone: _____

School Attending: Littleville Chester Middle School High School

My child _____ has permission to be picked up at

_____ for the 2015-2016 school year.

Parent's Address

Circle One: Monday Tuesday Wednesday Thursday Friday AM PM

My Child _____ has permission to be dropped off at

_____ for the 2015-2016 school year.

Parent's Address

Buses are not allowed to make **unscheduled stops** other than what is specified on their route sheet.

Parent/Guardian Signature: _____ Date: _____

Bus # _____ Bus Stop: _____