

Special Education Transportation Application

This form must be completed by school staff and approved by the school board's Student/Educational Services Department

Proposed Start Date		End Date (if applicable)	
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REQUEST ORIGINATED FROM

School		Name	
Role		Email	

STUDENT INFORMATION

Last Name		First Name	
Age		Date of Birth	
		Grade	

PRIMARY ADDRESS

House #	Street Name	Town	Postal Code
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Guardian Name	Relationship to Student	Email	Phone
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SECONDARY ADDRESS (IF APPLICABLE FOR TRANSPORTATION)

House #	Street Name	Town	Postal Code
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Guardian Name	Relationship to Student	Email	Phone
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ATTENDING SCHOOL

School Name		<input type="checkbox"/> Regular Class <input type="checkbox"/> Special Education Class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program Name			Attends Full Day	Attends AM Only	Attends PM Only
		Class Type			

TRANSPORTATION REQUIREMENTS

	Picked Up From	Taken to	Start Time	Frequency				
Morning				<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri
Midday				<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri
Afternoon				<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri

RELEVANT SPECIAL EDUCATION DETAILS

Reason for Request		
<input type="checkbox"/> IPRC (formally identified)	<input type="checkbox"/> Met at Bus	<input type="checkbox"/> Met at School
<input type="checkbox"/> Student requires a wheelchair accessible bus		
<input type="checkbox"/> Student attends a special education program outside of their regular bus route		
<input type="checkbox"/> Student does not qualify for busing but has limited adaptive skills and is unable to walk to school safely		
<input type="checkbox"/> Student is unable to safely ride their bus without the support of an adult monitor, if approved by the board A monitor will support the student to board, ride, and deboard the bus safely. Monitors are employed by the bus company and are provided with similar training to drivers in order to support students with special needs. Monitors are not educational assistants or medical professionals and will not administer medication, except for epinephrine injection pens in an emergency situation. Monitor support is "hands off" except for emergency situations.		
Supporting Details for Monitor Requirement		
<input type="checkbox"/> Student is unable to safely ride the bus without the use of a safety harness, if approved by the board Parents/Guardians and school staff are responsible for ensuring the student is secured on the bus. Drivers and Monitors are not responsible for securing harnessed students.		
Supporting Details for Safety Harness Requirement		
Safety Harness Measurements		
Chest (circumference)	Waist (circumference)	
<input type="checkbox"/> Student would benefit from the following OTHER accommodations, if possible		
Supporting Details		

MEDICAL/SAFETY INFORMATION

<input type="checkbox"/> Student has a Safety Plan/Behaviour Support Plan <i>Do not forward these plans to Tri-Board. Include any relevant details related to transportation in the section below</i>
<input type="checkbox"/> Student has a Medical Plan of Care/Medical Plan <i>Schools are responsible for providing Tri-Board with a copy of the plans(s) outside of the Special Education Transportation form process. Refer to your internal board policy.</i>
Non-medical student information relevant to Transportation General information and/or strategies that the bus driver/monitor may find helpful when interacting with the student to ensure a safe and comfortable ride. Please do not include any personal health or family information including medical diagnosis, custody details, etc.,

Please send this completed form to your board's Special Education Representative for approval. They will forward it to Tri-Board.