

Request for Transportation to Two Homes for Students in a Joint Custody Arrangement

2016-2017 School Year Form TRA-T22A

Student(s) Name:	School:	Grade:
Parent/Guardian:	Parent/Guardian:	
Address #1: (as registered at the school)	Address #2:	
Contact Number:	Contact Number:	
Email Address:	Email Address:	
Signature:	Signature:	
Both parents/guardians <u>MUST</u> sign this, or an identic parent's/guardian's acknowledgement and complian Joint Custody Arrangements and Having Two Homes	ice with Policy and Procedure T22 T	y OSTA. Signature indicates fransportation for Students in a
child, accompaniment by siblings/buddy, distance from firs first or second address in the event of an emergency, enviparent/guardian or other caregivers at the bus stop, frequence from the student's safety, schedules must be confirmed one address to another in a two-week period.	ronmental surroundings (urban or rural ency or complexity of schedule.	l), potential assistance from

OSTA may contact the parents/guardians and/or school Principal to seek more information if required to properly assess the request. Complete the Joint Custody Transportation Schedule Request Calendar for the school year. If approved, this form and calendar will be provided to the school and the bus company(ies) providing the service.

Please submit to <u>your school's zone email account</u> or fax 613-224-8840.

Notice of Collection: Ottawa Student Transportation Authority ("OSTA") acts on behalf of your school board and contracts transportation service providers to arrange transportation to and from school for eligible students. The personal information you provide on this form will be shared with the relevant staff of OSTA, school board and transportation provider for the purpose of providing appropriate and safe transportation. The information collected is treated as described in our privacy policy and in accordance with applicable laws.



