**Student Transportation**

**Release Authorization for Individual Student Travel (Third Party Release)**

Date: ______________  School: _______________________________________

Activity: _____________________________________________________________

<table>
<thead>
<tr>
<th>Activity</th>
<th>Location</th>
<th>Dates</th>
</tr>
</thead>
</table>

I give permission for _______________________________ to ride home from

Name of Student

Location____________________ with______________________________

Name of Adult over 21

If you have any questions, my contact information is:

Home Phone:____________________   Cell Phone: ______________

Parent or Guardian: _______________________________

Date:________________________

Administration: _______________________________

Date:_____________________

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*Please Note: This permission slip must be completed, signed by the parent/guardian and authorized by the school principal or their designee PRIOR to the student’s departure for an event or activity. The school must provide a copy to the bus supervisor before bus departure.*