Durham Student Transportation Services

Phone: 905-666-6395 Toll Free: 1-800-240-6943

www.dsts.on.ca

Request Joint or Shared Custody Transportation

New ☐ Change ☐	Transportation Start Date: _____ MM/DD/YY	
Student(s) Name:	School:	Grade:
Parent/Guardian (a):	Parent/Guardian (b):	
Address #1: (Primary Address)	Address #2:	
Note: both addresses above must be within the boundary of the designated area school		
Contact Number:	Contact Number:	
Email Address:	Email Address:	

Transportation Information

Program: Special Education ☐ French Immersion ☐ Gifted ☐ Regular ☐

Parent/Guardian Address											**Parent/Guardian Address**										
Street and Number											Street and Number										
City, Postal Code											City, Postal Code										
Phone Number											Phone Number										
Address Within Transporting Zone : Yes ☐ No ☐											Address Within Transporting Zone : Yes ☐ No ☐										
AM	M	☐	T	☐	W	☐	T	☐	F	☐	AM	M	☐	T	☐	W	☐	T	☐	F	☐
PM	M	☐	T	☐	W	☐	T	☐	F	☐	PM	M	☐	T	☐	W	☐	T	☐	F	☐
Caregiver Address ☐																					
Street and Number																					
City, Postal Code																					
Phone Number																					
AM	M	☐	T	☐	W	☐	T	☐	F	☐											
PM	M	☐	T	☐	W	☐	T	☐	F	☐											

Note: Transportation may be provided to students in accordance with all other eligibility criteria as outlined in the DSTS Transportation Policy found at www.dsts.on.ca

For caregiver/daycare one address may be utilized on a consistent weekly schedule.

Note: Parents are encouraged to carefully consider the capability and maturity of the student to manage the custodial schedule, given that the school will not provide boarding assistance and the bus driver is not responsible for managing alternating schedules. Parents/guardians are responsible for ensuring that students board the correct bus and disembark at the correct bus stop location. DSTS reserves the right to withdraw services at its sole discretion, if the safety of the student is compromised.

Comments:

DSTS may contact the parents/guardians and/or school Principal to seek more information if required to properly assess the request.

Both parents/guardians MUST sign below on this, or an identical request form to be processed by DSTS.

Signature Parent (a): **Date:**	**Signature Parent (b):** **Date:**
Principal Signature: **Date:**	**DSTS Approval Signature:** **Date:**

Notice of Collection: Durham Student Transportation Services (DSTS) 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 DSTS, 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.