

Student's Name _____ School _____ Grade _____

Driver's Name _____ Bus/Route _____ Date _____

Notice To Parents

The purpose of this report is to inform you of a disciplinary incident involving your child on the school bus. We ask you to support this action and cooperate with the corrective consequences initiated. Action taken conforms to the rules and guidelines as outlined in Arlington Public Schools Policy 6605.

- Violation of Procedures _____
- Chronic Minor Infractions
Parent has already been notified by the driver

Description of incident:

Driver Actions

- Step 1: Student warning, student conference, parent notified, signed copy of bus rules returned to the driver and filed.
- Step 2: Conduct report sent home, student assigned seat up to _____ days.

Driver's Signature _____ ****Original signature required! Please print and sign.****
(This notation will not print.) Date _____

Director's Signature _____ ****Original signature required! Please print and sign.****
(This notation will not print.) Date _____

Building Disciplinary Action **Discipline Code** _____

- Step 3: Suspension of bus privileges for three (3) school days. Suspension begins _____ to _____
- Step 4: Suspension of bus privileges for five (5) school days. Suspension begins _____ to _____
- Step 5: Suspension of bus privileges for twenty (20) school days. Suspension begins _____ to _____
- Step 6: Suspension of bus privileges up to the remainder of the year. Suspension begins _____ to _____
- Drop down bus ticket: Students demonstrating Exceptional Misconduct may be subject to a Drop Down Bus Ticket.
This means mandatory loss of bus privileges, number of days to be determined by the building and Transportation Department dependent upon the infraction. The appropriate law enforcement agency may also be contacted for illegal activities.

Dear Parent(s)/Guardian(s),
Your son/daughter has received a Bus Conduct Report. Should your child's behavior continue to be disruptive or violate district or state bus rules, the next Disciplinary Notice may/will result in the automatic suspension of your child's bus riding privileges for a period or at least _____ days.
To ensure the safety of all student passengers and bus drivers, your help and cooperation is greatly appreciated.

Comments

Administrator Signature _____ ****Original signature required! Please print and sign.****
(This notation will not print.) Date _____ Parent/Guardian contact date _____

Appeal Procedure

Parents of students and students who are eighteen (18) years of age or older, who wish to appeal a suspension of bus privileges may request an informal conference with the building principal as set forth in WAC 180-40-240.