

**OLDHAM COUNTY BOARD OF EDUCATION  
ADMINISTRATION REGULATION – 8005.06-F**

**BUS ASSIGNMENT CHANGE**

Date \_\_\_\_\_

Bus No. \_\_\_\_\_

Student Name \_\_\_\_\_ School \_\_\_\_\_

Teacher \_\_\_\_\_

The above name child is approved for the following change in bus assignment: (Include Specific Approved Bus Stop)

\_\_\_\_\_

Date of change: \_\_\_\_\_

**Parent Request Received Via: (Please check one) Note: \_\_\_\_\_ In-Person: \_\_\_\_\_**

\_\_\_\_\_  
Authorized Signature