



HOPE TRANSPORTATION

STUDENT INFORMATION PACKET 2024-2025



Special Transportation

Dear Parents/Guardians,

The Vancouver Public School Transportation Department will be providing transportation services for your student. It is important that you are familiar with the VPS Transportation procedures and guidelines in this reference packet. Your student's safe, appropriate, and timely transportation is a team effort. By working together, we can provide a positive experience for your student as we transition into a new school year.

Please contact VPS Transportation to assist you with any problems or concerns associated with your student's transportation. Thank you in advance for your help and cooperation in providing safe and efficient transportation for your student.

Sincerely,

Transportation Department
Vancouver Public Schools

ROUTE INFORMATION

Transportation Department | Vancouver Public Schools

Please record your student's information below for future reference.

Student Name _____ Date _____

Pick-up Time _____ Bus # _____ Driver _____

Drop-off Time _____ Bus # _____ Driver _____

- All students must be ready to board the bus at the scheduled time. Students should be at the designated stop ready to board 5 minutes prior to their scheduled time. The bus will not wait past your student's scheduled time.
- For the first two (2) weeks of the school year, please have your child ready at least ten minutes prior to the scheduled pick-up time. This will allow for any changes in the route due to additions, deletions, or traffic conditions. For the remainder of the year, your child must be ready five minutes prior to scheduled pick-up time. We want all children to arrive at school on time. The bus does not wait at the stop for this program.
- When your child does not need transportation please call Vancouver Transportation Department by 6:00 a.m. You may also leave a message at (360) 313-4800, 24 hours a day, to inform us if your child will not need transportation. When your child does not ride the bus for two consecutive days, to or from, and you did not call, it will be necessary for you to call Transportation to start service again (by 6:00 am for same-day service).
- Do not request to have our drivers honk. They are not allowed to honk the horn due to patron complaints.
- Any change in pick up and drop off location and/or phone number needs to be made with the school and Melissa Newhouse 313-1483, NOT the bus driver.
- Buses do not go into apartment complexes to pick up or drop off students.
- ALL kindergarten students must be met at the bus by an authorized adult. Please fill out the attached form and return it to the driver within 5 days. Same-school siblings must have written permission, signed by the principal, to take a kindergarten sibling off the bus. Older siblings are allowed with parental permission.

SUPERVISION AND CHANGES

Students may only use one pick-up and one drop-off location.

These may be different places for morning and afternoon, i.e. AM pick up at home, PM drop off at daycare, but this must be consistent everyday of the week.

Important Things to Remember...

- **Always** have your student ready 5 minutes before the scheduled pick-up time.
- **Always** be at the drop-off location 5 minutes before the scheduled drop-off time. The driver will only wait 1 minute if possible.
- Please make your presence known by being **easily** visible at the drop-off point.
- After school, your student's driver will make **ONE** attempt to deliver your student at the drop-off location. If there is no supervision at that location, your student will be **returned to school at the end of that route**.
- Please keep your home and cell phone numbers **current** with your student's school and Transportation.
- Any changes in who may receive your student from the bus **must be made in writing** & given to your student's driver.
- Please be sure persons authorized to receive your student are prepared to show photo ID.
- Please keep your home and cell phone numbers current with your child's school, the driver, and The HOPE program office.

PLEASE DETACH THIS FORM FROM THE PACKET,
FILL IT OUT, AND RETURN TO YOUR CHILD'S BUS DRIVER
IN THE NEXT FIVE DAYS.

THIS FORM WILL BE PUT ON FILE IN THE TRANSPORTATION OFFICE.

CHILD'S NAME:

HOME ADDRESS:

HOME/CELL TELEPHONE:

PARENTS NAME:

CHILD CARE PROVIDER:

CHILD CARE ADDRESS:

CHILD CARE TELEPHONE:

EMERGENCY TELEPHONE:

PARENT WORK TELEPHONE:

CHILD MAY BE RECEIVED BY

Please list names & relationship to child. Please have ID ready to show the driver.

1)

2)

3)

PARENT/GUARDIAN SIGNATURE:

DATE: