



Administrative Procedure FORM 551-3

## 2026-2027 Annual Lloydminster Bus Transportation Request

E-mail completed form to: [transportation.department@nwsd.ca](mailto:transportation.department@nwsd.ca)

Busing Start Date: \_\_\_\_\_mm/dd/yyyy) ☐ New Student/Family ☐ Changes to Student Information

|                  |                   |
|------------------|-------------------|
| Parent/Guardian: | Parent /Guardian: |
| Mailing Address: | Mailing Address:  |
| Mobile Phone:    | Mobile Phone:     |
| Home Phone:      | Home Phone:       |
| Work Phone:      | Work Phone:       |

|  |  |
|--|--|
|  |  |
|  |  |

**Legal Land Description:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ W of 3  
(NE, NW, SE or SW) (Section) (Township) (Range) (Meridian)

Draw your driveway/street and home location on the section of land to show where the school bus will access your property.

Can a bus turn around in your driveway? YES\_\_\_NO\_\_\_If no, a road stop will be required.

Is this residence on reserve land? YES\_\_\_NO\_\_\_ NO\_\_\_

Are there currently students being transported from this residence? YES\_\_\_

Does child(ren) attend French Immersion? YES\_\_\_NO\_\_\_

### STUDENT INFORMATION:

Office Use Only  
Student Number

|             |               |              |       |
|-------------|---------------|--------------|-------|
| Name: _____ | School: _____ | Grade: _____ | _____ |
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| Name: _____ | School: _____ | Grade: _____ | _____ |
| Name: _____ | School: _____ | Grade: _____ | _____ |
| Name: _____ | School: _____ | Grade: _____ | _____ |

Please list any additional information that the bus driver needs to be aware of such as health restrictions.

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\_\_\_\_\_

\_\_\_\_\_

|                                                                                              |
|----------------------------------------------------------------------------------------------|
| <b>Office Use Only</b>                                                                       |
| Bus Driver: _____ Bus Route: _____                                                           |
| Comments: _____                                                                              |
| Driver Notified: <input type="checkbox"/> Method: _____ Date: _____ GeoRef Entry Date: _____ |
| RM Notified: _____ Payroll Notified: _____                                                   |