



1041-10A Street  
Wainwright, Alberta T9W 2R4  
Director of Transportation (780) 806-2051  
Fax: (780) 842-3255

Transportation Phone (780) 806-2052 or (780) 806-2054  
Email: [transportation@btps.ca](mailto:transportation@btps.ca)

## CROSS JURISDICTIONAL (NON-RESIDENT) BOUNDARY EXEMPTION REQUEST

Request:  Present School Year \_\_\_\_\_  New Request  
 Upcoming School Year \_\_\_\_\_  Extension for Previous Request

Parent/Guardian Name(s): _____				
Mailing Address: _____				
Box/Street	Town	Province	Postal Code	
Legal Land Description/Physical (Street) Address: _____				
Email Address: _____			Phone: (____) _____	
School of Choice (Current): _____		Designated School (Resident/Closest): _____		
Distance to School of Choice: _____		Distance to Designated School: _____		
Resident Board: _____		Attending Board: _____		

Last Name	First Name	Grade	School	DAYS OF WEEK (M,T,W,TH,F)

Reason for Transportation Request:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**THE PARENT(S)/GUARDIAN(S) IS RESPONSIBLE FOR THE TRANSPORTATION OF THE ABOVE NAMED STUDENT(S) (PLEASE REFER TO 701.82 AP BOUNDARY EXEMPTION RESIDENT STUDENTS ADMIN PROCEDURES).**

I, the undersigned, would like to access transportation services with the Buffalo Trail Public Schools Regional Division No. 28 for the above noted student(s). It is understood that students seeking cross jurisdiction (non-resident) boundary exemption are the responsibility of the parent(s)/guardian(s). The Board may make school bus service available to a school of choice for non-resident students:

- 1.1 They have been accepted and registered at the school of choice. Student Education Services and Student Transportation Services Departments have been consulted.
- 1.2 Providing there is space available on the bus.
- 1.3 If space becomes an issue, then privileges will be revoked.
- 1.4 BTPS has a bus in the area or in close proximity to the non-resident student's residence, and the pickup and drop off are at a designated safe spot on route, as determined by the Director of Transportation.
- 1.5 Parents have received permission from the Resident Board.
- 1.6 Parents have received permission from the Attending Board.
- 1.7 Parents have received permission from the Transporting Board.
- 1.5 Parents are to inform the driver when children are not riding the bus and are on time for pick up and drop off.
- 1.6 Ineligible students have paid the required fee. **\$285.00/child or \$570.00/family (2+ children)**

Student placement will be made on a first come first serve basis although preference will be given to previous users after all eligible students for that transportation service area have been assigned seating. **Failure to meet the timelines for requesting Cross-Jurisdictional (Non-resident) Boundary Exemption Bussing may result in the loss of privileges and parents/guardians will have to meet the bus on route. This form/request is to be completed annually. All students are subject to [701.7AP](#).**

Requesting Transportation from Residence	Requesting to Meet Existing Bus on Route
Parent(s)/Guardian(s) Signature: _____ Date: _____	
By typing your full name in to the digital signature field and checking the box you are signing your name to approve the terms above.	
Fee Required: Yes No (Distance to Designated (Closest) School is less than 2.4 km) _____ km Distance	

**FOR OFFICE USE ONLY:**

Confirmed Registration at School  \_\_\_\_\_ Faxed/Emailed to School  \_\_\_\_\_

Entered in TLS  \_\_\_\_\_ Trans Code  \_\_\_\_\_ Travel Code/Pass Type  \_\_\_\_\_

Student Listing  \_\_\_\_\_ Entered into Fee Spreadsheet  \_\_\_\_\_

Gave Parent PU/DO Times or Contractor Phone #  \_\_\_\_\_

Notified Contractor  \_\_\_\_\_

Notified MD/County of New Pick Up

On Route

Off Route  \_\_\_\_\_ KM Distance Added/Day \_\_\_\_\_ (Contractors Initials to approve # of additional KM)

Route #: \_\_\_\_\_ Location of Stop Where Meeting Bus: \_\_\_\_\_

Stop #: \_\_\_\_\_ Stop Address: \_\_\_\_\_

Start Date: \_\_\_\_\_

Pick Up Time: \_\_\_\_\_ a.m. Drop Off Time: \_\_\_\_\_ p.m.

Contractor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Bus Driver Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Fee Collected:** \_\_\_\_\_ **Received:** \_\_\_\_\_ **Receipt #:** \_\_\_\_\_  
Amount Date

Requests/Action Taken:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Meeting Bus on Route:**

Approved  Denied \_\_\_\_\_ Director of Transportation \_\_\_\_\_ Date

**Transportation Requested From Residence:**

Resident Board Approval Received  Yes  No \_\_\_\_\_ Date

Attending Board Approval Received  Yes  No \_\_\_\_\_ Date

Transporting Board (BTPS) Approved  Yes  No \_\_\_\_\_ Date

BTPS Board Motion #: \_\_\_\_\_