

## BISD BUS SAFETY PRESENTATIONS REQUEST

### BISD Transportation Department

**School Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**School Contact Person:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

#### TYPE of Presentation (2):

##### 1. BUSTER Bus Safety Presentation (9:45 am/10:20 am)

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Location:** \_\_\_\_\_ **Grade level(s):** PK-3<sup>rd</sup>

**Number of students:** \_\_\_\_\_ (PK thru 1<sup>st</sup>)

**Number of students:** \_\_\_\_\_ (2<sup>nd</sup> & 3<sup>rd</sup>)

##### 2. Bus EVACUATION Safety Procedures\*\* (9:45 am/10:20 am)

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Number of students:** \_\_\_\_\_ 4<sup>th</sup> Grade

**Number of students:** \_\_\_\_\_ 5<sup>th</sup> Grade

***Special Needs Bus:*** Yes No

\*Girls must wear pants/shorts for the evacuation presentation-No skirts/dresses.

\*All students must wear athletic shoes.

- Bus Safety Request must be submitted a minimum of **10** working days prior to the selected date.
- Please submit Bus Safety Request via email ONLY to [olivia@bisd.us](mailto:olivia@bisd.us)
- NO other requests will be accepted.