REGION 12 SCHOOLS - Burnham School

SCHOOL YEAR 2025-2026

Resident Alternate Transportation Request to WAASAP!! *Must be completed annually*

Please submit this request to Nicole Grant email at grantn@region-12.org. Approval will be issued in writing. Please allow 5 school days for a response. This request will not be effective until written approval is issued.

Student Name	e:		
School:	Burnham School		Grade:
Parent or guar	rdian making request:		
Best contact r	number:		
Email:			
	nt Norman Sunshine Center,		ffered through the Washington Art ashington Depot after school on
Days:	MondayTuesday	Wednesday	ThursdayFriday
Name of Adu	It present to supervise student:		
Contact Num	ber of Supervising Adult:		
Requested Ef	fective Date:	Date of	Last Class:
By signing be	elow:		
resider arrival and 2) I accep	nce in Bridgewater before conditions in Washington cannot be pt full responsibility for my ch	tinuing on to the stop for e guaranteed (approxima ild when he/she is at the	opping off students at their places of art class in Washington and that te arrival time is shortly after 4:00); alternate location and hereby above at the requested location.
	change in this schedule, pleas gion-12.org.	e notify Claire Cavalea	at Burnham School by email at
Signature of I	Parent or Guardian	Ī	Date
SCHOOL U	SE ONLY: Approval:		Date:
School/Parent/	/Bus Company Notified on	by	(initials)