

North East Independent School District
Special Needs Transportation Supervision Waiver Form

This form needs to be on file in the Special Needs Transportation Office immediately after service begins
The completed form may be faxed to the Special Needs Transportation Office at 657-8863

Please understand that the North East ISD reserves the right to restrict these release instructions if in the opinion of district officials, the student could harm him/herself or be harmed by others. In case of a restriction, the parent or guardian would have to arrange for the child to be received by an authorized person during the regular route.

STUDENT'S NAME

SCHOOL

BUS NUMBER

**PLEASE INITIAL ONLY ONE OF
THE FOLLOWING CHOICES:**

____ I authorize the North East ISD Transportation Department to release my child(ren) **UNATTENDED AND WITHOUT ADULT SUPERVISION**. NEISD Transportation will insure that your child is inside the residence prior to departing.

____ I authorize the North East ISD Transportation Department to release my child(ren) **UNATTENDED AND WITHOUT ADULT SUPERVISION**. If my child does not have his/her key, my child may be **LEFT OUTSIDE WITHOUT SUPERVISION**, and I release the North East ISD from any and all liability.

____ The persons listed below are the **ONLY** persons that are authorized to receive my child(ren) when released from the school bus. The below listed person(s) must present a picture ID to receive my child.

1. _____ PHONE NUMBER
2. _____ PHONE NUMBER
3. _____ PHONE NUMBER
4. _____ PHONE NUMBER

SIGNATURE OF PARENT OR GUARDIAN

____/____/_____
DATE

**PLEASE RETURN THIS FORM TO THE BUS DRIVER
AS SOON AS POSSIBLE**