



ORANGE UNIFIED SCHOOL DISTRICT TRANSPORTATION DEPARTMENT

726 W. Collins Ave., Orange, CA 92867

Dispatch: 714.997.6357 / Bus Pass: 714.538.8295 / Business Office: 714.997.6244

– STUDENT RELEASE / IMPORTANT INFORMATION –

Fill out this form, sign it, and return to the OUSD Trans. Department as soon as possible.

For your convenience, this form is available on the District’s website-www.orangeusd.org/departments/business-services/transportation/bus-pass-parent-pay-program. Fill-out, print, and return, or email it to buspass@orangeusd.org.

(Print clearly)

Student’s Name: _____

Student’s School: _____

Drop-off/Authorized Bus Stop location:

street address (additional info specifying exact drop-off location)

city zip code

Check ONE box below for P.M., minimum day, modified day, or any other drop-off:

- Release student to parent/guardian ONLY.
- Student can be released to enter residence unattended (also known as “self-release”).
- Student can be released when one of the following individuals is present to receive the student.
Note - anyone listed must meet the following qualifications: (1) must be 18 or older, (2) must be responsible & familiar with your child’s disability, (3) Must be prepared to deal with your child’s behaviors, (4) must have photo I.D. available.

_____/_____/_____
Name Age Relationship to student

_____/_____/_____
Name Age Relationship to student

_____/_____/_____
Name Age Relationship to student

Unless I have indicated my child can be “self-released,” I understand if I, my spouse (or other guardian), or one of the adults listed above is not present to receive my child, he/she may be returned to school provided school staff is available. As a last resort, my child may be taken to a local law enforcement agency.

_____/_____/_____
Parent/Guardian Printed Name Parent/Guardian Signature Date

_____/_____/_____
Cell Phone # Home Phone # Work Phone #

_____/_____/_____
Emergency Contact #1 Name Phone # Relationship to student

_____/_____/_____
Emergency Contact #2 Name Phone # Relationship to student

_____/_____/_____
Emergency Contact #3 Name Phone # Relationship to student