

*School Administrative Unit 67  
Bow and Dunbarton, New Hampshire School Districts  
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Superintendent of Schools

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Assistant Superintendent

**Ms. Tamara A. MacAllister**  
Director of Student Services

**Dr. Donald R. Gage, II**  
Director of Curriculum

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**TRANSPORTATION REQUEST FORM**  
**Policy EEBB-A**  
**Use of Private Vehicle to Transport Students**

\_\_\_\_\_ is my son/daughter / legal ward, residing at  
(Name of Student)

\_\_\_\_\_, Bow, NH / Dunbarton, NH (**please circle the town**).  
(Student's Physical Address)

On \_\_\_\_\_, the class is traveling to \_\_\_\_\_.  
(Location of event)

I am requesting authorization from SAU 67 to transport my student(s) to this event in my private vehicle for the following reason(s):

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

- Only the driver named on this form may drive the student to the event.
- I understand that transportation is at my own expense.
- I accept full responsibility and liability for transportation of my student(s) while on this trip.
- No other students will be transported in the vehicle.
- If changes in transportation are planned, or I am delayed in arriving to the event at the scheduled start time, I will notify SAU 67 as soon as possible.

\_\_\_\_\_  
Signature of Parent / Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Principal / Administrator

\_\_\_\_\_  
Date

Rev. 2-16-17  
Rev. 11-3-10  
Rev. 7-25-07

