

SCOTLAND COUNTY SCHOOLS

BUS CONDUCT FORM

Student's Name:	School:	Grade:
Driver's Name:	Bus #:	Date:

Notice To Parents
<p>The purpose of this report is to inform you of a disciplinary incident involving your child on the school bus. We ask you to support this action and cooperate with the corrective consequences initiated. Action taken conforms to the rules and guidelines as outlined in Scotland County Schools Policies.</p>

To Be Completed By Bus Driver

Description of Incident:
Bus Driver Signature: _____ Date: _____

To Be Completed By School Administration

Disciplinary Action:	
<input type="checkbox"/>	Warning.
<input type="checkbox"/>	Suspension of bus privileges for _____ days. Suspension begins _____ to _____.
<input type="checkbox"/>	Suspension of bus privileges for remainder of the year.

Comments:

Administrator Signature: _____ Date: _____
Parent/Guardian Contact Date: _____