



Montclair Public Schools

Permission to walk from bus stop
School year 2023-2024

Student Name: _____ ID# _____

School: _____ Grade: _____

Parent/ Guardian Name: _____

Address: _____

Phone: _____ Emergency Number: _____

I hereby grant my Student(s) permission to walk from the bus stop to home unaccompanied.

Bus Route Name: _____

Stop Location: _____

Signature: _____ Date: _____

Please fill out form and return via email to smaurice@montclair.k12.nj.us or
cmattison@montclair.k12.nj.us

If you have any questions, please contact the transportation department via email:
smaurice@montclair.k12.nj.us or cmattison@montclair.k12.nj.us

Note: Please allow 48-72 hours from the time the notice is completed and a confirmation email has been received to take effect. Please keep a copy of the completed form in your child's backpack.

