



Alternate Stop School Bus Pass

Lincoln County School District #2 Transportation
307-885-7146

This pass must be filled out completely and given to the bus driver upon entering the bus.

If needed please visit our website at transportation.lcsd2.org to find required information.

Students Full Name: _____ School: _____

This student has permission to ride route #: _____ animal: _____

Stop #: _____ Stop Name: _____

for _____ day(s), starting on this date: _____

to this address: _____

Contact Person: _____ Phone: _____

Authorized Signature: _____ Date: _____



Alternate Stop School Bus Pass

Lincoln County School District #2 Transportation
307-885-7146

This pass must be filled out completely and given to the bus driver upon entering the bus.

If needed please visit our website at transportation.lcsd2.org to find required information.

Students Full Name: _____ School: _____

This student has permission to ride route #: _____ animal: _____

Stop #: _____ Stop Name: _____

for _____ day(s), starting on this date: _____

to this address: _____

Contact Person: _____ Phone: _____

Authorized Signature: _____ Date: _____