

Onondaga County "School Bus Stop Ahead" Sign Request

Date: _____

School District: _____

Name and Title of Preparer: _____

Work Telephone Number of Preparer: _____ Email Address: _____

Sign Status (indicate whether this is a new sign, or a sign to be removed)	Town	Route No.	Street Name and Closest Cross Street	Directions of Travel	Location of Stop (Address or resident's name)	Grade(s) of Student(s)
(Example) New	Your Town	32	State Route 5 / Main St	South	Smith Residence (red house)	Kindergarten 3 rd grade
(Example) Removal	Any Town	15	South St / E. First St	West	1209 South St (yellow house)	Graduated moved
1.						
2.						
3.						
4.						
5.						
6.						