

BOSTON PUBLIC SCHOOLS



Code of Conduct
Attachment 7

SPECIAL EDUCATION ALTERNATIVE TRANSPORTATION PLAN

Per Code of Conduct—Section 14.4

Student's Name: _____ D.P. # _____

School: _____

Persons involved in developing this Plan (by name and role):

Signature: _____, IEP Liaison

Signature: _____, Headmaster/Principal

Signature: _____, Parent/Guardian

Signature: _____, Other: _____

Signature: _____, Other: _____

Transportation Plan: From _____ through _____

Signed Rejection: Parent/Guardian/Educational Advocate: _____

Signed Approvals: Parent/Guardian/Educational Advocate: _____

Student (if 18 years or older): _____

IEP Liaison: _____

ETF/SDH: _____

Headmaster/Principal: _____