

**Due:**

**OFF Road Stops/Turnarounds**      Bus # \_\_\_\_\_

**Off Road Stop(s):**

Please list each off road loading zone where you pull off to the side (shoulder) of the road using only the right turn signal to pick up or drop off students. Please list the exact address where you conduct the stop(s).

<b>ADDRESS</b>	<b>AM</b>	<b>PM</b>	<b>SCHOOL</b>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

**Turnarounds**

Please list the exact location, street address or intersecting roads where turnaround(s) are completed.

<b>ADDRESS</b>	<b>AM</b>	<b>PM</b>	<b>SCHOOL</b>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
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10.			

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