

Cleveland Heights / University Heights City School District Transportation Exception Request Form

Parent Name	
Home Address	Zip
Home Phone	Cell Number
Email Address	
Student Name	
School	Grade
Please detail current transportation arrang	ements along with conditions or
circumstances that you wish to have cons	idered by the Transportation Exception
Committee (TEC). Be specific and provide	all pertinent information and additional
paperwork to support your request. The TEC will base their decision on Board of Education Policy and the information you provide.	

Thank you for bringing this information to the attention of the TEC.