



# Waterford School District

**Transportation Department**  
1118 Sylvertis  
Waterford, Michigan 48328  
(248) 674-2692

Tammy Layton, Supervisor  
(248) 674-6393  
Theresa Black, Secretary  
(248) 674-2692

Dear Parent/Guardian,

## FOR THE 2025-2026 SCHOOL YEAR – “Opt Out” of Transportation

The Waterford School District offers a school bus transportation “opt-out” program for the 2025-2026 school year. The Opt-Out program is entirely **VOLUNTARY**. We designed this option for transportation-eligible families who do not need the bus to get their children to or from school during this school year.

There is no requirement to let the District know if you do not need transportation; however, we can design more efficient and appropriate bus routes for children who ride the bus regularly when you let the District know you do not need the bus for your children. You can opt-out for any or all of your children.

The opt-out transportation program

- will not impact your children’s ability to ride District-provided transportation to attend field trips, athletics events, emergency evacuations, etc.;
- will not affect your ability to change your mind during the year and put your children on a bus (see below); and,
- will require you to transport your children on school days with delayed openings or early dismissals.

This program helps the District optimize travel time on the school bus routes, identify appropriate bus stops, and allow for more consistent and efficient transportation services. If you wish to “opt-out,” please provide your student’s information below, sign, and turn it in at your child(ren)’s school, to the Kurzman Administration Building, or mail or email it to Transportation at [laytot01@wsdmi.org](mailto:laytot01@wsdmi.org).

If, at some point in time, your student needs transportation, please call the Transportation Office at 248-674-2692 one week before the date you need it, and we will make the necessary adjustments.

Name of Student: \_\_\_\_\_ School: \_\_\_\_\_

Name of Student: \_\_\_\_\_ School: \_\_\_\_\_

Name of Student: \_\_\_\_\_ School: \_\_\_\_\_

Name of Student: \_\_\_\_\_ School: \_\_\_\_\_

Signature of Parent or Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Sincerely,

*Tammy Layton*

Supervisor of Transportation

*Inspired, Educated, and Empowered to Thrive!*