Michigan Department of Education
Office of Special Education and Office of Health and Safety
March 2026

School Transportation Vehicle Waiver Request

Form Type

☐ Regular/Vocational Transportation ☐ Specialized Transportation

General Information

ISD Name: _____ District Code: _____

LEA/PSA Name: _____ Fiscal Year: _____

Purpose

Districts providing transportation to students in school transportation vehicles owned or leased by the district are required to annually submit a School Transportation Vehicle Waiver Request form. A school transportation vehicle is defined as a vehicle with a manufacturer's rated seating capacity of 10 passengers or less, including the driver. A school transportation vehicle is not a school bus. Therefore, **vehicles reported on this form are not to be included in the Michigan Department of Education (MDE) School Bus Inventory System (SBIS).**

For considerations before contracting or using school owned vehicles with capacities of 10 passengers or less, including the driver for pupil transportation, refer to MDE's advisory guidelines.

Instructions

1. Complete a separate form for regular/vocational transportation and specialized transportation, if applicable.
2. Complete the Form Type, General Information, Required Information, Description, and Certification sections.
3. Attach a copy of the Tire and Loading Information sticker, typically located on the driver's side door jamb, for each vehicle. The Vehicle Identification Number (VIN) must be clearly visible on each sticker and match an associated VIN reported in the waiver.
4. Email completed regular/vocational transportation form and required attachment(s) to MDE-OHS@michigan.gov. Email completed specialized transportation form and required attachment(s) to MDE-OSEProgramFinance@michigan.gov. Include the Tire and Loading Information stickers with both submissions.
5. If approved, MDE Office of Special Education (OSE) or Office of Health and Safety (OHS) will sign and return waiver to district.
6. Retain approved waiver to report allowable costs associated with school transportation vehicle(s) included in approved waiver on the district's Transportation Expenditure Report (SE-4094) for the applicable fiscal year.
7. If waiver request has been denied, MDE OSE or OHS will return waiver to district, requiring modifications and/or justification.
8. Submit a new waiver request with modifications made, if applicable.

Required Information

Complete the table below for each district owned or leased school transportation vehicle to be included in the waiver request. If additional lines are needed, provide the required information below as a separate attachment.

For information on reimbursable expenditures for school transportation vehicles included on an approved waiver, refer to the SE-4094 Instructions.

As a reminder, districts are prohibited from using a vehicle with a manufacturer's rated seating capacity of 11 passengers or more, that is not a school bus, to transport students to or from school or school-related events. A school transportation vehicle, as defined in the School Bus Inventory Report Instructions, is a vehicle with 10 passengers or less, including the driver. See Pupil Transportation Act of 1990, PA-187 of 1990, Section 257.1810. For the definition of a school bus, see Pupil Transportation Act of 1990, PA-187 of 1990 Section 257.1807.

A vehicle's manufacturer's rated seating capacity must be determined based on the number of seat belt anchors in the vehicle, not the number of students riding in the vehicle. The manufacturer's rated seating capacity can also be found on the Tire and Loading Information sticker typically located on the driver's side door jamb.

District Owned or Leased	Type of Vehicle Ex. (Sedan, SUV, Van)	Make/Model	Manufacturer's Rated Seating Capacity (Max of 10)	Vehicle Identification Number (VIN) (17 Characters)

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Description

Briefly describe how the school transportation vehicle(s) included in this waiver request will be appropriately used in the transportation of students.

Certification

I certify to the best of my knowledge all information provided for the school transportation vehicle waiver request submitted is true, complete, and accurate.

I further certify all vehicles included on this waiver have a manufacturer's rated seating capacity of 10 passengers or less, including the driver.

LEA/PSA Authorized Official (if applicable): _____

Title: _____ Email: _____

_____ _____

LEA/PSA Authorized Official Signature Date

ISD Authorized Official (required): _____

Title: _____ Email: _____

_____ _____

ISD Authorized Official Signature Date

Technical Assistance

For regular/vocational education transportation, direct questions regarding this form to MDE-OHS@michigan.gov.

For specialized transportation, direct questions regarding this form to MDE-OSEProgramFinance@michigan.gov.

MDE USE ONLY

☐ **Request Approved** ☐ **Request Denied**

Authorized Official: _____ Title: _____

_____ _____

Authorized Official Signature Date