



DAY CARE TRANSPORTATION REQUEST FORM FOR 2016-2017 SCHOOL YEAR

AUBURN ENLARGED CITY SCHOOL DISTRICT

The information requested below is necessary in order to evaluate your request for the transportation of your child to and/or from a registered day care provider. **Please return this form to the transportation office at Harriet Tubman Administration Building or your child's school by April 1, 2017.** You must fill out a new form each year, to be eligible for transportation:

- **Your day care provider must be licensed**
- **Day care provider's residence must be eligible to receive transportation to the school of attendance**
- **Transportation must be to/from one location**

Date: _____ Requested Start Date: _____

School: _____ Grade Entering: _____

Student Name: _____ Phone #: _____

Student Home Address: _____

Parent/Guardian Name: _____ Phone #: _____

Parent/Guardian Home Address: _____

Place of Employment: _____ Work Phone #: _____

Emergency Contact Name: _____ Phone #: _____

Medical Information (Optional): _____

Day Care Provider Information

Day Care Provider: _____ Phone #: _____

Day Care Address: _____

NYS Certified: Yes _____ No _____ Registration No _____

A.M. Only	P.M. Only	A.M. & P.M
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Briefly describe the reason for the request: _____

Parent/Guardian Signature: _____ Date _____

District Use Only:

Approved: _____ Disapproved: _____ Bus # _____