## WEST IRONDEQUOIT CENTRAL SCHOOL DISTRICT 2017-18 SCHOOL TRANSPORTATION APPLICATION FOR TRANSPORTATION TO AND FROM A CHILDCARE PROVIDER

2017-18 school transportation is scheduled to be provided for eligible district pupils as follows:

GRADES K-3	by the nearest available route (public highway) must meet these minimums:  All Students  More than 1 1/2 Miles		
persons who move into the district after April 1, 201	T be submitted no later than <u>April 1, 2017</u> . In the case of 7, residence in the district must be proven with the district the district registrar, and within 30 days of moving into the ed for transportation.		
provider must be located within West Irondequoit School Di New York State Certification of the childcare provider. Req	provider must meet eligibility as stated above. The childcare istrict boundaries. The District reserves the right to require proof of quests for transportation to a place of parental employment will not be re provider service and is located within the West Irondequoit School		
Children must ride the same bus every day a	and be dropped at the same bus stop every day;		
requests for transportation to alternate addresses on alternate days will not be honored.  TO APPLY FOR 2017-18 SCHOOL TRANSPORTATION TO AND/OR FROM A CHILDCARE PROVIDER, PLEASE COMPLETE FORM BELOW  2017-18 SCHOOL TRANSPORTATION APPLICATION FOR TRANSPORTATION TO AND /OR FROM A CHILDCARE PROVIDER  Please complete both sides of application.  To Board of Education, West Irondequoit Central School District: I request that school transportation be provided for my child to and/or from a childcare provider in West Irondequoit during the 2017-18 school year.			
		Child's Name:	Birth Date:
		Home Address:	Home/Cell Phone #: Parent Work #:
		Childcare Provider's: Address: Phone #:	
Start date:			
School child is attending:	Grade child is enrolled in as of September 2017:		
	<del></del>		

SUBMIT APPLICATION FORM NO LATER THAN APRIL 1, 2017 TO:

Date of

Application:

Signature of parent or guardian:

WICSD Board of Education

321 List Ave., Rochester, NY 14617

ATTN.: TRANSPORTATION DEPARTMENT OR FAX TO: 585-336-3023

CERTI	FICATION
We certify	that
(Name of parent/legal guardian)	(Name of childcare provider)
by the child's parent until picked up by the school bus and the above childcare provider's address, until the parent pi	protection of the before named child from the time of drop off dor from the time the child is dropped off by the school bus at icks the child up. The childcare provider and the parent each escribed herein are terminated or altered, each will assume of District Transportation Department at 336-2992.
This certification applies to:	
Before school pick-up	
After school drop off	
Both before and after school	
Signature of Parent	Date
Signature of Childcare Provider	Date