

BALLSTON SPA CENTRAL SCHOOL DISTRICT

ELEMENTARY SCHOOL

LATE BUS TRANSPORTATION AUTHORIZATION FORM

I give permission to my child to ride home on the elementary late bus when they participate in school sponsored after school activities. As my child's parent or guardian, I understand that my child will be dropped off according to the home or daycare address listed on this form. *The bus driver assigned to your child's late run will not drop your student off at any location other than the bus stop location closest to your child's Home or Daycare address.*

I understand this form needs to be completed only **once** for the entire school year.

STUDENT NAME: _____

I WOULD LIKE MY CHILD DROPPED OFF AT:

CHECK ONE: HOME:

DAYCARE:

HOME ADDRESS: _____

DAYCARE ADDRESS: _____

Drop-off points for this transportation are geographic in nature and may require my child to walk from a drop-off point other than the one they use on the regular afternoon transportation home. ***WE CANNOT GIVE YOU A DROPOFF TIME.***

Since these runs are geographic and different students stay after & ride the buses on different days, the drop off time may fluctuate by as much as 30 minutes, depending on who is riding the bus on a given day.

PHONE #'S: HOME: _____

CELL: _____

WORK: _____

SCHOOL: _____

GRADE: _____

I have read and understand the guidelines provided by the school district with respect to elementary late bus transportation.

PARENT SIGNATURE: _____ DATE ____/____/____

PLEASE NOTE: A SEPARATE FORM MUST BE ON FILE FOR EACH CHILD USING THE LATE BUS.

Transportation Department Office Use Only

Late Bus Assigned _____

Date Form Received ____/____/____