

# 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 address only. **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 home address.** I understand this form needs to be completed only **once** for the entire school year. *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.* I have read and understand the guidelines provided by the school district with respect to elementary late bus transportation.

STUDENT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE # \_\_\_\_\_ HOME

\_\_\_\_\_ WORK

SCHOOL: \_\_\_\_\_ GRADE \_\_\_\_\_

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 \_\_\_\_/\_\_\_\_/\_\_\_\_