

**Transportation Department**

1133 Lehigh Station Road ~ Henrietta, NY 14467

Phone: 585-359-5370

School Year
/**TRANSPORTATION REQUEST FORM - SPLIT CUSTODY ARRANGEMENTS****STUDENT INFORMATION** For families with multiple students, a form for each student in the family is required.

School Name	Date of Request
Student First, Last Name	Home Address
Grade (current year)	

REQUEST FOR CARE

Please note that arrangements must be consistent weekly, with a maximum of two pick-up and two drop-off points during the week.

Start Date : _____

All requests must be submitted by Wednesday prior to the week of the request change.

☐ AM Care Days attending (check): M T W TH F☐ PM Care Days attending (check): M T W TH F

Provider Name:

Provider Name:

Provider Address:

Provider Address:

Phone Number:

Phone Number:

CANCELLATION OF REQUEST☐ AM Care Cancellation Date:☐ PM Care Cancellation Date:**PARENT/GUARDIAN INFORMATION**

First and Last Name

Primary Phone Number

Email Address

The district provides transportation within district boundaries for shared custody arrangements for students in grades K-12. Transportation arrangements must be consistent with a maximum of two pick-up and drop-off points. Parents or guardians of students residing in the Rush-Henrietta Central School District must submit a written request for transportation to a child care provider annually no later than **April 1** of the preceding year.**

My signature certifies that I am the parent/legal guardian of the above-mentioned student and authorize transportation to and/or from the care provider listed.

For office use only

Custodial Parent/Guardian Signature

Date

Sitter	Bus In	Bus Out
Home	Bus In	Bus Out

**** Change requests received after August 12 *may not be accommodated* until the second week of school. Bus passes *will not* be written for late child care form submissions.**

Please submit form to the school your student attends.