



**FREEPORT PUBLIC SCHOOLS
 TRANSPORTATION OFFICE
 235 NO. OCEAN AVENUE
 FREEPORT, NEW YORK 11520
 867-5220 Fax 867-8961
 transportation@freeportschools.org**

Application for Transportation of Pupil To or From a Child Care Site

Applications must be submitted by July 1. Applications received after this date will not receive this service until October 1. At the beginning of school, there is a five (5) day processing period. Upon approval, your child will be issued a new bus pass from their school building. Once the new pass comes home, the change to transportation will take place the following school day.

Student: _____ School: _____

Home Address : _____

Grade: _____ Date of Birth: _____

Name of Parent or Legal Guardian: _____ Relationship to student: _____

Home Phone: _____ Cell: _____ Work : _____

I hereby request that my child be transported under the following conditions:

PICK UP (AM) LOCATION: _____

Name of Provider _____ Phone _____

DROP OFF (PM) LOCATION: _____

Name of Child Care Provider: _____ Phone : _____

STUDENT WILL BE A WALKER: AM _____ PM _____

The Address of Provider must be located within the Freeport School District boundaries to qualify for transportation as well as meet mileage requirements set by the Freeport Union Free School District.

I understand and agree that this request for special transportation is on a daily basis. Request for fewer than five days a week will not be honored.

In the event that this application is approved, I do hereby agree to save the school district harmless from any damages resulting from the approval of this request.

I have read this entire application and I understand it fully. All the statements included in this application are true to my own personal knowledge.

Date: _____

 (Signature of Parent or Guardian)

For office use only:

APPROVED DENIED Freeport School District Transportation Office

By: _____ Effective Date _____

**PLEASE NOTE THAT A NEW APPLICATION MUST BE SUBMITTED EACH YEAR.
 July 1 IS THE DEADLINE FOR SEPTEMBER SERVICE.**