

HARTFORD CENTRAL SCHOOL DISTRICT
Transportation Form



Please complete Section 1 for your student. Complete Sections 2 and 3 only if they apply to your student. This will help us provide accurate information for scheduling your child's/children's transportation needs to our Transportation Department. **This form must be filled out on an annual basis for each student in your household, or anytime there is a change to your information.**

Section 1 - Student Information

Student Name: _____ Grade: _____
Primary Home Address: _____
Parent/Guardian Name: _____ Phone: _____
Mother's Cell Number: _____ Mother's Work Number: _____
Father's Cell Number: _____ Father's Work Number: _____

Section 2 - No School Transportation Needed (Please Circle All Days That Apply)

AM Bus Run:	Monday	Tuesday	Wednesday	Thursday	Friday
PM Bus Run:	Monday	Tuesday	Wednesday	Thursday	Friday

Section 3 - Sitter/Alternate Pickup/Drop Off Location Information

Please Note: Sitters are any location other than the primary home address

Effective Date: _____

Name of Sitter/Childcare Provider: _____

Address: _____ Phone: _____

Please pick up from the Sitter's: Monday Tuesday Wednesday Thursday Friday

Please drop off at the Sitter's: Monday Tuesday Wednesday Thursday Friday

Hartford Central School District Transportation Policy

Bus drivers will not drop-off a student in grades K-3 if the parent/guardian or approved sitter is not visible, unless there is an older sibling riding with the student, **or** a completed "Acknowledgement of School Practice; Request for Exception; Authorization; and Release" form is filed with the Elementary Principal.

If any student is returned to school it will be the responsibility of the parent to pick up the student.

Parent/Guardian Signature

Date