

**2009/2010 SCHOOL YEAR
FARMINGDALE SCHOOL DISTRICT
REQUEST FOR CHILDCARE TRANSPORTATION**

Student Name: _____ School: _____

Home Address: _____ Grade: _____

Home Phone: _____ Parent Work Phone: _____

I, hereby, request that my child named above be: picked up (before school)

dropped off (after school)

at the bus stop assigned to the following childcare provider:

Name: _____

Address: _____

Phone #: _____

My child is in the care of this provider 5 days per week during the following hours: _____ to _____

AFFIDAVIT

The following parties attest that _____ will be cared for by,
(Student's Name)
_____, _____, for the 2009/2010 school year.
(Provider's Name) (Provider's Address)

We understand that _____ is eligible for special transportation ONLY
(Student's Name)
when under the care of the childcare provider either before or after school.

We attest that this placement is true and necessary and is not motivated by a desire to receive transportation services to which the student is not eligible.

****THIS FORM MUST BE RENEWED ANNUALLY****

It is understood that students are not permitted to use childcare bus stops on days when they are not under care and control of the childcare provider.

We agree to reimburse the Farmingdale UFSD for its costs pursuant to the transportation of this student if it is found he/she is not so entitled.

Signed _____
(Parent)

Signed _____
(Childcare Provider)

Date _____

Date _____

Notarized:

Notarized:

(Office Use Only)

AM Stop _____ Bus # _____

PM Stop _____ Bus # _____