

CHILD CARE REQUEST FORM

TUDENT / PARENT INFORMATION REQUESTED START DATE:		E:
Student Name:	School Attending:	Grade:
Home Address:		
Parent/Guardian:	Cell Phone:	
Home Phone:	Work Phone:	
MORNING REQUEST:		
Child Care Provider:	Phone Number:	· · · · · · · · · · · · · · · · · · ·
Child Care Address:		····
Pick Up from Home: M T W TH F	Pick Up From Child Care: M	Г W TH F
AFTERNOON REQUEST:		
Child Care Provider:	Phone Number:	
Child Care Address:		····
Drop off at Home: M T W TH F	Drop off at Child Care:	M T W TH F
	ke up to two weeks to be implemente oventry Transportation with the effe	
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The Board shall transport students in grades <u>K-5</u> who are for the purpose of child care. Transportation will not be of the district. The parent/s of students in child care mut and approval.	provided for any day care facility located	within a walking boundary or outside
 The following conditions must also be met: For the beginning of each school year the Chil Such students must board or disembark at an etal. There must be space available on the bus; Such students will be accepted on a first come. Such students may not continue to ride the bus assigned to the bus causing the bus to reach its. The request must be for a minimum of two moderates. A request to ride an alternative bus, for a temp. Subject to the foregoing, not more than three (arrangements may be sought during a school to term. Services will only be provided within the bour. 	existing stop on the regularly scheduled bus, first-served basis; s if other students, eligible for transportations rated capacity; and onths; porary situation, will not be issued; (3) requests for change in location to accorderm. Split schedule requests will only be according to the state of the state	on under the foregoing provisions, are mmodate a modification of child-care eccommodated one (1) time per school
Parent/Guardian Signature:		Date:
(I have read the poli	icy rules and request the change in accor	dance with the rules listed above)