

EAST AURORA UNION FREE SCHOOL DISTRICT

Transportation Department
430 Main Street
East Aurora, New York 14052

PARENTS: Please complete this form if you wish to request transportation to a **NON-PUBLIC SCHOOL (OUT OF DISTRICT)** or a **NON-PUBLIC SCHOOL (WITHIN THE DISTRICT)** for your child (ren) for the **2016-2017 school year**.

In order that the District may be accountable for the location and safety of children using the school transportation system, all bus route assignments must be consistent. That is students may not ride one bus route one day and a second bus route the next day.

PLEASE COMPLETE ALL INFORMATION. If listing a caregiver's residence under pick-up or drop-off location, please include caregiver's name, address, and phone number. If your child (ren) will walk or be driven to school please note that as well.

Student: _____

School: _____ Grade (for the next school year): _____

Parent/Guardian: _____

Student's Legal Address: _____

Parent/Guardian Home Phone: _____ Work Phone: _____ Cell Phone: _____

BUS PICK UP LOCATION *BEFORE* SCHOOL

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

BUS DROP OFF LOCATION *AFTER* SCHOOL

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Parent/Guardian Signature _____ Date _____

Mail completed form by **April 21, 2016** to:

East Aurora Union Free School District
Transportation Department
430 Main Street
East Aurora, NY 14052

For any questions, please call 716-687-2313