TRANSPORTATION APPLICATION FOR PRIVATE SITTER 2022-2023 SCHOOL YEAR

| I hereby give permission for my ch | hild, | | , to be | transported by |
|--|--|--|-------------------------|-----------------------|
| Jefferson Township Board of E | Education for the 2 | 2022-2023 school | year to/from | the bus stop of |
| | and to | be cared for by | | |
| residing at | | , phone # _ | | , to be |
| effective | <u>.</u> | | | |
| Transportation will be accommosomed of the exact start date. A bump concept will be applied. If the last private sitter student will | pplications will be pr a new student move | rocessed in chrono es into the area wh | logical order. 1 | The last on-first off |
| I will require: | | | | |
| Other Needs: AM | and from a private sit 5 days a week from CLE EITHER "AM" or | on <mark>e loca</mark> tion, or PN | | k to one location |
| PLEASE NOTE: | | 3 | 9 | |
| I UNDERSTAND THAT BY O TO MY LEGAL STOP. SWITCH MUST BE APPROVED BY THE | ING BACK TO MY HO | ME STOP WILL DEF | | |
| | Signature of p | parent/guardian | | |
| | Address | | | |
| | Telephone #_ | | Date | |
| My child will attend | | | School. | |

THIS FORM MUST BE SUBMITTED DIRECTLY TO THE MAIN OFFICE OF YOUR CHILD'S SCHOOL.

The Transportation Dept will <u>not</u> accept forms from parents or daycares.