

**HICKSVILLE PUBLIC SCHOOLS
200 DIVISION AVENUE
HICKSVILLE, NY 11801-4800
(516) 733-2185 - FAX # (516) 937-0744**

STATEMENT FROM PARENT CONCERNING CHILD CARE TRANSPORTATION

Transportation may be provided to a residential child care provider if the following criteria are met:

- 1) Per New York State Education Department Section 3635(1)(e) of Education Law - Authorizing a Board of Education, at its discretion, to provide transportation between school and a child care location, for children in grades K-8, for request, that are submitted no later than April 1, 2019, preceding the next school year.**
- 2) The child care provider must reside within the transportation zone of your child's school and be eligible for transportation per the district's guidelines.**
- 3) If requesting an alternate route from your child's school, seats on alternate bus must be available.**

I, _____, residing at _____

_____, New York, which is within the Hicksville UFSD, hereby certify to the following provision for the transportation of my son/daughter

NAME _____ GRADE _____ SCHOOL _____

I further understand that the bus stops for pick-up and drop off will be the same each day and will be on the route of the sitter's residence.

I further understand that the sitter will be home to greet my child when he/ she exits the school bus.

I will notify the sitter whenever my child will not be attending school.

Sworn before me this _____, day of _____ 20_____

NOTARY _____

NOTARY SEAL

PARENT SIGNATURE

PARENT TELEPHONE #

AM _____ or PM _____ BUS STOP _____ BUS# _____

I, _____, residing at _____

_____ Telephone # _____

I will be acting as a parent status in reference to _____

During the hours of: _____ AM _____ PM of the school year 20_____ 20_____

Sworn before me this _____, day of _____ 20_____

NOTARY _____

NOTARY SEAL

CHILD CARE PROVIDER SIGNATURE