

PRIVATE/PAROCHIAL TRANSPORTATION REQUEST FORM

2011-2012

DATE: _____

Private/Parochial Transportation
Transportation Department
Boston School Department
26 Court Street, 4th Floor
Boston, MA 02108
Fax – 617-635-9541

I believe that the student named below is eligible for school bus service provided by the Boston Public Schools. A student is eligible for school bus service if:

- He/she is a resident of Boston,
- Lives more than on miles from his/her school
- Is enrolled in grades K-5 (student must be five years of age by **September 1, 2011**).
- Resides in the same BPS school zone as his/her school is located.

If assigned to a school bus, I understand that my child may travel up to ninety minutes each way to and from school. I also understand that my child may be dropped off at the bus stop in the absence of a parent or guardian. Sixth through twelfth grade students residing over two miles from their school are eligible for an MBTA pass. Transportation services for Private and Parochial school students are subject to the availability of the Boston Public Schools bus fleet. In accordance with the above, this letter is a formal request that the Boston Public Schools provide transportation service for my child.

_____		_____
Child's Last Name, First Name		Date of Birth

Street Number – Street Name		

Neighborhood – Zip Code		
_____	_____	_____
Home Phone	Emergency Phone	Emergency Contact Name
_____		_____
School Name		Grade

Signature of Parent/Guardian: _____

Private School Administrator Use

I verify, to the best of my ability, that the above information is accurate.

Signature of School Administrator _____

RMU/Transportation Use

School Code _____ Student Number _____ Geocode _____