



BETHLEHEM CENTRAL SCHOOL DISTRICT

SPLIT PARENTAL CUSTODY TRANSPORTATION REQUEST FORM

*****ONE FORM PER STUDENT*****

STUDENT NAME _____ DATE OF BIRTH _____

SCHOOL OF ATTENDANCE _____

PICK-UP ADDRESS OR BUS STOP LOCATION _____

DROP-OFF ADDRESS OR BUS STOP LOCATION _____

ADDITIONAL INFORMATION REGARDING STUDENT TRANSPORTATION

One parent must be designated as the primary contact for transportation arrangements.

Both parents must mutually agree on a single bus stop location.

If the bus stop location is a relative's house or licensed day care within current bus stop walking guideline, then no additional coordination is needed.

For locations other than a relative's house or licensed day care, the primary contact will work with the transportation department to select a bus stop along a route for the student's school of attendance. Unless the student is in kindergarten or adult to adult handoff is specified in an IEP, the bus will not wait for someone to meet the student before departing.

The student transportation department will verify the location as appropriate and within the school zone. No cross elementary school zone transportation will be provided unless to/from a licensed day care. Bus stop locations selected cannot be located outside the boundaries of the District. Places of employment or businesses cannot be used as bus stops.

Form must be signed by **both** parents and emailed to the BCSD Student Transportation Department at transportation@bethlehemschools.org. Forms may also be faxed to (518) 439-7885. Please allow a minimum of two (2) business days for processing after receipt. Please note changes will not be accepted from August 15 through the third Monday of September.

This request must be renewed every school year and/or whenever there is a change in family circumstances.

By our signatures below, we affirm it is our responsibility to ensure safe travel to and from the bus stop and supervision of our child while waiting for the bus. We hereby voluntarily waive, and will not claim or assert in any forum, any damages that may occur for our child being picked-up or discharged at a location other than home, a relative's house or licensed day care provider.

PARENT 1
SIGNATURE _____ DATE _____

PARENT 2
SIGNATURE _____ DATE _____

OFFICE USE ONLY	STUDENT FOUND IN ASPEN	YES	NO	APPROVED	YES	NO
	BUS STOP LOCATION VERIFIED	YES	NO	ENTERED/VERIFIED IN VERSATRANS	YES	NO

REASON, IF NOT APPROVED _____