

Pittsford Schools

Transportation Department
 100 Mendon Center Road
 Pittsford, NY 14534
 585.267.1480
 Fax: 585.267.1481



Dual Location Transportation Request 2018/2019 School Year

Student's name _____

Grade (K-8)* _____

School _____

* Half-day kindergarten students should specify AM or PM

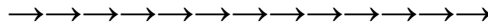
Primary address _____ Zip code _____
House #, Street, Town

Parent/Guardian's name (1) _____ Cell phone # _____
Please print

Parent/Guardian's name (2) _____ Cell phone # _____
Please print

Home telephone # _____ Office telephone # _____

Parent/Guardian must read and sign the reverse side



*** Revisions must be made by completing new application ***

Location 2 Information

Parent/Guardian/Daycare provider's name _____

Street address _____

Cell phone # _____ Home Phone # _____ Office Phone# _____

Place an "X" in the appropriate box(s) for which student will require transportation to/from location 2. For all other times, student will be transported to/from the primary address.

DUAL LOCATION ARRANGEMENTS ARE NOT EFFECTIVE UNTIL YOU HAVE BEEN CONTACTED BY THE TRANSPORTATION DEPARTMENT. PLEASE ALLOW 5 FIVE WORKING DAYS TO IMPLEMENT DAYCARE ARRANGEMENTS

Mon.	Tues.	Wed.	Thurs.	Fri.

From location 2 to school Requested Start Date: _____
 From school to location 2

Office use only

Date received: _____ Parent/Guardian: _____

Date processed: _____ School: _____

Effective date: _____

Dual Location Transportation Request Form Instructions

Dual Location Service Criteria

- Both locations must be located within the School district boundaries.
- Available for Grades K-8 only.
- Child may have a maximum of 2 stop locations including primary address.
- Dual location transportation must be on a *regular* weekly basis.
- Once a weekly transportation schedule is established, it must remain consistent.
- Please email any permanent changes or send an updated Dual Location form.

An application for transportation services to dual locations must be filed each year with the transportation department by the parent or guardian (one form per student). These applications must be received by the transportation department by **April 1st, 2018**.

If dual location transportation needs change throughout the school year, applications must be re-filed with the transportation office to ensure that we are able to maintain accurate data. We will need five working days to implement the dual location arrangements. These forms are available at the transportation office and on our website www.pittsfordschools.org.

Dual location transportation is complex to arrange and requires that schedules be shared with drivers and teachers; notifying them of what days students will or will not be riding certain buses. Please note that it is your responsibility to inform your school of the dual location arrangements.

Parent/Guardian's signature _____ Date _____

Parent/Guardian's signature _____ Date _____

Dual residence arrangements require both parents signatures

PLEASE MAIL COMPLETED APPLICATION TO:

Pittsford Central School District

Transportation Department

100 Mendon Center Road

Pittsford, NY 14534

Or Email to: Lynn_Moore@Pittsford.Monroe.edu