



Caesar Rodney School District Early Intervention Program Transportation Form

Transportation is offered to students in the Early Intervention Program, not including peer role models. Transportation is to and from Star Hill within the Caesar Rodney School District. Please complete this form if your child requires transportation and meet the criteria for transportation.

Completed by: parent staff **Via:** in person phone email **Date:** _____

Student: _____ **Birthdate:** _____

Parent/Guardian #1: _____ **Phone #:** _____

Parent/Guardian #2: _____ **Phone #:** _____

Please check here if your child will **not** require transportation.

The following people are authorized to get _____ on/off CR transportation vehicles:

	Name	Phone #
1.	_____	_____
2.	_____	_____
3.	_____	_____

Child's Weight: _____ lbs **Child's Height:** _____ inches

What type of car seat does the child use at home: 5 point harness high back booster

The student needs to be picked up at this address: _____

The student needs to be dropped off at this address: _____

- ✓ I understand transportation is for pick up & drop off within the CRSD attendance area.
- ✓ Changes to transportation will need to be made in person with identification.

Parent Signature: _____

FOR OFFICE USE ONLY:

Student will attend the AM PM session on the following days:

Monday Tuesday Wednesday Thursday Friday

Sent to Transportation on: _____ Via: _____

Entered into eSchool on: _____ By: _____