



**TRANSPORTATION DEPARTMENT
CHILD CARE TRANSPORTATION MODIFICATION FORM**

CURB TO CURB (01) SPECIAL EDUCATION ONLY

Name of Student:

(Please Print) _____
Last First M.I.

Student Identification Number:

(May be found on School Information **MAILER**)

Name of Parent: _____

Home Address: _____

Home Telephone: _____ Work Telephone: _____

CURRENT TRANSPORTATION ASSIGNMENT (IF APPLICABLE):

Route: _____ Stop: _____ Location: _____

Name of Child Care Facility: _____

Address: _____ Telephone: _____

Assigned School: _____ Morning _____ Afternoon _____ Both _____

Signature of Parent or Guardian

Date

If You Have Any Questions, Please Call (216) 838-4BUS (4287)

TO BE COMPLETED BY TRANSPORTATION PLANNING

Assigned Transportation from Child Care Facility: _____ Bus: _____

Run: _____ Stop: _____ Location: _____

Pick-Up Time: _____ Drop Off Time: _____

Effective Change Date: _____ Parent Notification Date: _____ By: _____

SPECIAL EDUCATION
CURB TO CURB ONLY (01)

CHILD CARE POLICY
CLEVELAND METROPOLITAN SCHOOL DISTRICT
TRANSPORTATION DEPARTMENT

Child Care assignments will be made according to the following criterion ONLY:

- a) The Child Care facility must be located within the city of Cleveland.
- b) The facility must be within a five-minute radius of an existing route servicing the assigned school.
- c) Students must be picked up and dropped off from one location all **FIVE DAYS**.

A new Child Care Transportation Modification form must be submitted each year, and/or when there is an address, Child Care facility or School Assignment change.

There will be no exceptions or variations to this policy, so please choose Child Care facilities in advance, if possible, and carefully.

Upon completion of this form, return it to:

Mail: Cleveland Metropolitan School District
Transportation Department
3832 Ridge Road
Cleveland, Ohio 44144

or

Email: transportationconcerns@clevelandmetroschools.org