

## **School of Origin Transportation Request Form**

"School of Origin" is defined as the school in which the student is or was last enrolled. 2024 - 2025

Current Home Address:			
Date Requested:			
Transportation is requested for the follo	owing students to continue to attend	the listed school(s):	
Last Name:	First Name:	MI: School:	
Last Name:	First Name:	MI: School:	
Last Name:	First Name:	MI: School:	
Parent Contact Name:	Best phone #:		
Alternate Contact Name:	Best phone #:		

Special transportation is attempted for homeless students in accordance with the Every Student Succeeds Act's (ESSA) provision for school stability. School of Origin Transportation will be attempted upon parent request and continued as long as the coordinated ride(s) is/are in the best interest of the student(s).

The best interest of the student is determined by attendance (including minutes per day) and other individualized factors.

- If this bus ride is not used consistently, the ride will be discontinued.
- In the case of illness, when the bus ride is not needed, please notify the Transportation Department as soon as possible by calling (904) 225-0127. Staff is available as early as 6 am.
- If a bus ride is not in the best interest of the student(s) because of length of time on the bus, bus exchanges, etc., is the parent/caregiver interested in transporting the student(s) themselves?
- Coordinating this new route usually takes several days at best. Is the parent willing/able to provide transportation until the bus ride begins? (The liaison can usually help with gas by providing a gas card.)
- Kindergarten students are not allowed to be dropped off at a bus stop without an adult there to meet them.

I understand that this special transportation route is being arranged specifically for my student(s) listed above and that this arrangement will continue if this is in the best interest of my student(s). I will do my part by being early when meeting the bus and by notifying the Transportation Department when the bus ride is not needed.

				I	Date:		
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Signature of Parent/Caregiver or initials of staff obtaining verbal agreement by phone and printed contact name.

If verbal, ask: "Would you rather come in to sign this contract, or have me sign my initials as a witness to this verbal agreement?" If verbal only, send a copy to the parent/caregiver by mail or email. (Do not wait for the signature to begin route.)

Email form immediately to the Homeless Liaison at cresseymol@nassau.k12.fl.us and give a copy to your school's Principal.