BABYLON UNION FREE SCHOOL DISTRICT 50 Railroad Avenue Babylon, New York 11702 631-893-7915 FAX 631-893-7938

TO:	Parent/Guardian		
FROM:	: Transportation Office		
Re: (Child Care Transportation		
lr	n order to process your request for transportation for your		
child _	who is in grade to &/or		
from th	ne School for the 20 20 school year,		
you must certify below that your child needs transportation to &/or from			
the existing bus stop closest to the child care provider's residence or			
facility (eligible address) which will be assigned by the Transportation			
Office. EACH OF THE FOLLOWING SECTIONS MUST BE SO NOTARIZED:			
A. I,	certify that I reside at Parent/Guardian		
	and am presently employed at		
<u> </u>	during		
Name/Address/Telephone Number			
regular school hours. I also certify that Child Care Provider			
residi	ing at provides child Address/Telephone Number		
care s	services for my child as follows: Days and times		
Prese	ently, my child walks or uses the BUS		
STOP: _	and I am requesting		
	tation on the BUS STOP:		

IN WITNESS HEREOF, the parties hereto have year first above written.	e hereunto subscribed their names, the day and
BOARD OF EDUCATION BABYLON UNION FREE SCHOOL DISTRICT of the TOWN OF BABYLON	BY
STATE OF NEW YORK))SS:	
COUNTY OF SUFFOLK)	
On theday of	20, before me came
same person described in and who executed the acknowledged to me that she/he executed the	
	Notary Public
B. I,a	m presently providing child care
services for	at my home/facility.
IN WITNESS WHEREOF, the parties hereto h and year first above written.	ave hereunto subscribed their names, the day
BOARD OF EDUCATION BABYLON UNION FREE SCHOOL DISTRICT of the TOWN OF BABYLON	BY:
STATE OF NEW YORK)	
) SS: COUNTY OF SUFFOLK)	
On the day of 20), before me came
same person described in and who executed to acknowledged to me that she/he executed the	, to me known and known to be me to be the he foregoing agreement, and she/he same.
	Notary Public