Parent Authorization for

4:00 PM and After School Transportation -

20___ - 20___

	Date:
	Date.
I/We	
	rint full name(s)]
residing at	
[Print complete street add	dress including any apartment number]
	, New York
[Printboroughname]	[Zip code]
the parent(s) of	
[Print ON	IE student name only]
authorize	
[Printed	omplete school name]
to receive reimburs ement from the Bo ard constant and constant are the constant const	$I of Education of the \hbox{\it City} School District of the \hbox{\it City} of$
New York (dba New York City Department	t of Education and "NYCDOE") for the transportation
of the Student to and from the School for p	urposes of satisfying the requirements of New York
State Education Law Section 3627, i.e., to	ransportation that includes afternoon trips from the
School after 4:00 P.M. I/We acknowledge	e and agree that I/We shall not seek reimbursement
for the said transportation independently	y from the NYCDOE.
	Signature

When completed, this form should be returned to be retained by child's school. It is NOT necessary to return this form to the NYC DOE.