



HORNELL CITY SCHOOL DISTRICT

Jeremy P. Palotti, Superintendent

120 Raider Road Hornell, New York 14843
Phone 607.324.1302 ext. 1450 | Fax 607.324.1345

High School | 607.324.1303
Intermediate | 607.324.1304
N. Hornell | 607.324.0014
District Offices | 607.324.1302

Transportation Form for the 2024-2025 School Year

Dear Parent/Guardian,

The Hornell City School District requires that a bus transportation form be completed for each child **in your household. A form MUST be** completed for each child. Fill out the backside of this form and return it to your child's school at your earliest convenience. If you are unable to return the form to your child's school, please return the completed form to the District Office at 120 Raider Drive, Hornell, NY 14843. You may also email the form to steve.sleight@hornellcsd.org. The due date for the transportation form is, **August 8th**. Families who may have already submitted a form, but need to adjust pick-up or drop off time, please fill out a new form and return it as soon as possible.

Please remember that the first few weeks of school are hectic and buses may not be on "schedule" so for students eligible to ride the bus, please be at the bus stop on time.

If a change needs to be made, please contact our office as soon as possible to complete a new form. **This can only happen once per semester.** We understand that emergencies happen but please allow for up to 3 days to honor this request. We can be reached between 8:00 a.m. and 2:00 p.m. at 324-2633.

***Students must be 4 years old to ride the bus.**

Sincerely,

Steve Sleight
HCSD Director of Transportation

Transportation Form

This form needs to be completed for each of your children, even if your child does not need transportation. When completing this form, note that we will not transport students to any other address other than the one included on this form and cannot make bus changes to a different address for playdates/social dates.

Child's Information

First Name _____ Last Name: _____ Grade: _____

Transportation Request

_____ My child does **NOT** require transportation by the district(Skip to Signature)

_____ My child **DOES** require transportation by the district
Students in grades 4PK-6 are eligible to ride the bus if they live .7 miles or more from their school building while students in grades 7-12 are eligible to ride the bus if they live 1.5 miles or more from the high school.

Morning Pick-Up Location

You may choose one option.

Option 1: Home Address

Please pick my child up at my home address.

Home Address: _____

OR: Option 2: Daycare or Alternate Address

Please pick my child up at this Daycare/Alternate address.

Daycare or Contact Name: _____ Phone _____

Address: _____

Afternoon Drop-Off Location

You may choose one option.

Option 1: Home Address

Please drop off my child at my home address.

Home Address: _____

OR: Option 2: Daycare or Alternate Address

Please drop off my child at the Daycare/Alternate address.

Daycare or Contact Name: _____ Phone _____

Address: _____

Parent/Guardian Contact Information:

Home Phone: _____ Cell Phone: _____

Print Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____