

**FINDLAY CITY SCHOOLS**  
**PRE-SCHOOL – GRADE 5 BABYSITTER BUS SERVICE REQUEST FORM**

This form is valid only during the 2023-2024 school year.

**Requests will be processed to and/or from a babysitter based on the following conditions:**

1. Submit this form to the Transportation Office after all requested information has been completed.
2. The babysitter residence must be located in the eligible bus area of the child's school of attendance.
3. New stops will not be created. Requested stop must be on an existing route. Seating space must be available on the bus.
4. Students must ride the same bus each morning and board from one designated bus stop.  
Students must ride the same bus each afternoon and depart the bus at one designated bus stop.  
The morning bus and afternoon bus assignment may be different; but both must remain consistent every day.
5. Shared parenting arrangements will be recognized per court orders and accommodated when possible.
6. Approved requests are valid for one school year only. Parents who want to participate again the following school year must complete and submit a new Babysitter Bus Service Request Form prior to the annual June 30th deadline.  
Please note that priority is given to eligible riders without transportation services from their home neighborhood during the first few months of each school year. As a result, forms submitted after June 30th may not get processed until October.

**RETURN FORM TO: [transportationadmins@findlaycityschools.org](mailto:transportationadmins@findlaycityschools.org)**

**PARENT: Please provide the following information:**

Today's date \_\_\_\_\_ Requested start date \_\_\_\_\_  
Student's name \_\_\_\_\_ School \_\_\_\_\_  
Home address \_\_\_\_\_ Grade: (Circle One) PS K 1 2 3 4 5  
Parent/Guardian name \_\_\_\_\_ Email \_\_\_\_\_  
Home phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
Parent's signature \_\_\_\_\_ Principal's signature \_\_\_\_\_

**BABYSITTER: Please provide the following information:**

Name \_\_\_\_\_  
Address \_\_\_\_\_ Home phone \_\_\_\_\_  
Sitter's signature \_\_\_\_\_ Cell phone \_\_\_\_\_

Student is currently an eligible bus rider. \_\_\_No. \_\_\_Yes. Student rides bus # \_\_\_\_\_ Bus stop \_\_\_\_\_

List bus stop being requested. Leave blank if unknown. Transportation will review & determine closest stop meeting state safety regulations.

**Morning** service requested from \_\_\_home neighborhood or \_\_\_sitter neighborhood. Stop requested: \_\_\_\_\_

**Noon** service requested to/from \_\_\_home neighborhood or \_\_\_sitter neighborhood. Stop requested: \_\_\_\_\_

**Afternoon** service requested to \_\_\_home neighborhood or \_\_\_sitter neighborhood. Stop requested: \_\_\_\_\_

**THE SECTION BELOW WILL BE COMPLETED BY THE TRANSPORTATION OFFICE.**

\_\_\_ Access could not be approved. Reason \_\_\_\_\_

\_\_\_ Access confirmed. **For safety reasons, bus service cannot begin before the designated start date below.**

**Date student may begin requested bus service** \_\_\_\_\_

Student assigned to A.M. Bus # \_\_\_\_\_ Assigned bus stop \_\_\_\_\_

Student assigned to noon Bus # \_\_\_\_\_ Assigned bus stop \_\_\_\_\_

Student assigned to P.M. Bus # \_\_\_\_\_ Assigned bus stop \_\_\_\_\_

Transportation Director's/designee's signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_ Copy on file in office \_\_\_ Copy to bus driver & route book updated \_\_\_ Principal copy emailed \_\_\_ Parent copy mailed/emailed