



Annual Transportation Request Form

Complete one request form for each student in grades K-7 and return to the Gates Chili Transportation Department via email at businformation@gateschili.org or by mail at 4 Spartan Way, Rochester, NY 14624 by July 1 for annual requests or as soon as possible for updated requests. Please note that requests may take up to three (3) business days to process.

SECTION 1: STUDENT INFORMATION

Full name: _____ Grade: _____

Home address: _____

School: ☐ Gates Chili HS ☐ Gates Chili MS ☐ Florence Brasser ES ☐ Neil Armstrong ES
☐ Paul Road ES ☐ Walt Disney ES ☐ Other: _____

SECTION 2: PARENT/GUARDIAN INFORMATION

Full name: _____

Home phone: _____ Work phone: _____

Mobile phone: _____ Email address: _____

SECTION 3: LOCATION REQUEST INFORMATION

Please note: Transportation will be provided to any registered daycare within the Gates Chili Central School District boundaries. For a list of registered daycares, go to gateschili.org/Transportation and click on [Childcare Information](#). Any non-registered childcare sites or alternative pick-up locations must be located within the school boundaries of the school attended by the student. Pick-up and drop-off locations are required to be the same all five days of the week. If locations change, please complete a new form.

Morning pick-up information

AM name: _____

AM address: _____

AM phone: _____

Afternoon drop-off information

PM name: _____

PM address: _____

PM phone: _____

By signing below, I understand that any requests for transportation at a location other than the student's home must be submitted annually by July 1 and that failure to meet this deadline may impact the date on which transportation from alternate locations may begin.

Parent/guardian signature: _____

Request date: _____ Effective date: _____