



OSWEGO
CITY SCHOOL DISTRICT
Fully prepared and life ready!

Transportation Center

Mark H. Fitzgibbons Drive, Oswego, New York 13126
www.oswego.org

Dr. Mathis A. Calvin III
Superintendent of Schools
(315) 341-2001
FAX: (315) 341-2910
mcalvin@oswego.org

Thomas Gunn
Transportation Supervisor
(315) 341-2900
FAX: (315) 341-2918
tgunn@oswego.org

Alternate Transportation Request

----- **Student Information** -----

Student Name: _____ Grade: _____

Parent/Guardian Name: _____

Legal Home Address: _____

Home Phone: _____ Cell Phone: _____ School Attending: _____

----- **Child Care Provider Information** -----

Name of provider: _____ Licensed with DSS? Yes No

Provider Address: _____

Description/Geographical location of facility: _____

Telephone Number: _____

School zone of provider: _____

Alternate transportation is required: (Start date) _____ (End date) _____

Transportation needed: AM: Yes No Parent Transport
PM: Yes No Parent Transport

Parent/Legal Guardian Signature: _____ Date: _____

Please return to our office – Fax: (315) 341-2918 – Email: wsuits@oswego.org

----- **Office use only** -----

Request Approved Request Denied Effective Date: _____

Reason for Denial: _____

AM Route: _____ Bus Stop: _____

PM Route: _____ Bus Stop: _____

Received by: _____