

## CORNWALL CENTRAL SCHOOL DISTRICT DROP OFF AUTHORIZATION FORM

Today's Date: \_\_\_\_\_ School Year: \_\_\_\_\_ Start Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_  
First
Middle
Last

DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ M \_\_\_\_\_ F

Home Address: \_\_\_\_\_  
(Street address, city, state, zip code)

Mailing address (if different from above): \_\_\_\_\_  
(Street address, city, state, zip code)

Parent/Guardian Name(s): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell/Work: \_\_\_\_\_

Email: \_\_\_\_\_

School: HS  MS  CES  WAE  COH  Grade: \_\_\_\_\_

For all elementary school students, the District maintains a practice of allowing a student to get dropped off their afternoon / homebound bus only when there is a parent or guardian at their stop. This is to help insure a safe return home when getting off their bus. If you would like to grant your child permission to get off their bus and return home unsupervised, please check the box below, sign your name and return this form to the District Transportation Office.

I grant permission for my child to get off their bus and return home unsupervised: YES

If you would like to grant permission to someone else to supervise your child when getting off their afternoon / homebound bus, please print their names and contact information below and return to the District Transportation Office.

Name	Relationship	Contact Phone Number

Parent /Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/ Guardian Name (print): \_\_\_\_\_

**Email this completed form to [transportation@cornwallschools.com](mailto:transportation@cornwallschools.com)**

**FOR OFFICE USE ONLY:** Date Received: \_\_\_\_\_ BUS / TRIP #: \_\_\_\_\_  
WPT Notified: \_\_\_\_\_ School Building Notified: \_\_\_\_\_