



NISKAYUNA CENTRAL SCHOOLS TRANSPORTATION OFFICE
1301 HILLSIDE AVE.
NISKAYUNA, N.Y. 12309
(518)370-0160

TRANSPORTATION REQUEST TO CHILDCARE LOCATIONS

Administrative Guidelines

CHILDCARE TRANSPORTATION INFORMATION

Transportation will be provided to childcare locations for Grades K – 8 subject to these guidelines:

1. Transportation services will be provided to childcare locations defined as “licensed daycare centers” within the school district boundaries, while transportation to non-licensed daycare centers/babysitters may only be provided within the attendance zone of the student’s school.
2. Childcare locations that the district currently recognizes as “licensed daycare centers” are: Niskayuna Community Day Care, KinderCare, Schenectady Jewish Community Center, JCC “Kid’s Time” programs (at the 5 elementary schools), Villa Fusco Day Care, Wiggles and Giggles Child Care, and Capital Kids Care.
3. Requests for transportation to non-licensed daycare centers and/or babysitters must be within the attendance zone of the student’s school and on an established route for that school.
4. Transportation services will be provided if space and drivers are available and time permits on the route.
5. Requests for service must be to the same location and for the same time five days a week.
6. Written requests for service must be submitted using the Transportation Request to Childcare Locations Form (next page) by April 1st. previous to the school year the service is needed.
7. Any permanent change should be submitted at least five days in advance and be made on the request form. The District may require up to 30 days to initiate the change.
8. Emergency request in the student’s transportation must be approved by the principal.

For more information, please call the
Director of Transportation at (518) 370-0160.



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TRANSPORTATION REQUEST TO CHILDCARE LOCATIONS
PLEASE PRINT CLEARLY

TODAY'S DATE _____ SCHOOL YEAR: _____

I, _____, the parent or legal guardian of the child named below,
request transportation for said child to and/or from a childcare location different
from the child's home address.

CHILDS'S FULL NAME: _____

ADDRESS: _____

SCHOOL ATTENDED: _____ GRADE: _____

CHILDCARE LOCATION: _____

NEAREST CROSS STREET: _____

Time of Day Needed: (PLEASE CHECK APPROPRIATE TIME)

_____ A.M. (before school pickup at Day Care)

_____ P.M. (after school)

Home Phone: _____ Work Phone: _____

Childcare Phone: _____

Effective date for transportation to begin: _____

Please return this form to the Niskayuna Transportation Office by **April 1** of the
school year prior to the year for which the request is being made.

I HAVE READ THE INFORMATION OF THE REVERSE SIDE

Signature Parent/Guardian

August 2022