

NEW YORK STATE  
OFFICE OF CHILDREN AND FAMILY SERVICES  
**TRANSPORTATION CONSENT FORM**  
Child Day Care Programs

Provider Name: \_\_\_\_\_ Facility ID Number: \_\_\_\_\_

Program Name: Kiddie Corner at Caz

This form may be used to meet the regulatory requirement to obtain written consent from the parent of a child for any transportation provided or arranged for by a caregiver, and to inform the parent when the person who is providing transportation changes. This form is not the Transportation Plan.

Parents whose children receive transportation services must receive, at the time of enrollment of their children, a copy of the program's transportation plan. If the plan is amended, parents must receive a copy of the amended plan prior to its start date.

It is recommended that a separate Transportation Consent Form be completed for each child.

I have been informed of, and agree to, the transportation plan of the above child care program.

Transportation Plan is attached to this Transportation Consent Form (Yes / No) *circle one*

Date of Transportation Plan \_\_\_\_\_

I give permission for my child (*name*) \_\_\_\_\_  
to be transported by (*caregiver*) \_\_\_\_\_  
*names and/or transportation* \_\_\_\_\_  
*contractor arranged for by the* \_\_\_\_\_  
*program* \_\_\_\_\_

At the following times (*check all that apply*):

- Only as recorded on the posted transportation schedule for my child
- Other (*explain*)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By signing this form I am giving consent for the above described transportation services.

Parent Printed Name: \_\_\_\_\_

Parent Signature: X \_\_\_\_\_

Date \_\_\_\_\_