Connections Organization

AUTHORIZATION FOR ALTERNATIVE TRANSPORTATION

It is the policy and expectation of the Connections Organization Schools (Connections Day School, South Campus, New Connections Academy, and Connections Academy East) that all students are transported to and from school by their district-provided transportation (cab, bus, etc.). However, in the rare event that alternate transportation arrangements need to be made, we require the completion of this consent form by the Parent/Guardian of that Student.

I, _____ hereby authorize my child
Parent/Guardian's Name

_____ to be picked-up from, and/or
Student's Name

dropped off for, school by the following trusted adult(s):

Please note, the individuals identified below must be **18 or older if they are a family member;** and **21 or older if they are not a family member.** Identification will need to be shown prior to the student being released.

_____	_____	_____
Adult's Name	***Phone Number***	***Relationship to the Student***
_____	_____	_____
Adult's Name	***Phone Number***	***Relationship to the Student***
_____	_____	_____
Adult's Name	***Phone Number***	***Relationship to the Student***
_____	_____	_____
Adult's Name	***Phone Number***	***Relationship to the Student***

I understand that I have the right to revoke this consent at any time. If I no longer want my child to be picked-up from and/or dropped off for, school by the by the individual(s) listed above, I must inform a School Staff Member of my wishes (in-person, via phone or in writing). I also understand that this authorization will be valid from the date of signature (below), until September 30th of the following academic year – not to exceed 12 months.

_____	_____
Parent/Guardian's Signature	***Date***