Instruction

This form is for School Year 2018-2019 only.
All questions should be address directly to your assigned OPT Coordinators.

Parent Authorization

for

4:00 PM and After School Transportation - 2018-2019

	Date:
I/We	
•	nt full name(s)]
residing at	
[Print complete street addi	ress including any apartment number]
	, New York
[Print borough name]	[Zip code]
the parent(s) of	
[Print ON	E student name only]
authorize	
·	mplete school name]
New York (dba New York City Department Conference of the Student to and from the School for postate Education Law Section 3627, i.e., trans	of Education of the City School District of the City of Df Education and "NYCDOE") for the transportation urposes of satisfying the requirements of New York sportation that includes afternoon trips from the and agree that I/We shall not seek reimbursement from the NYCDOE.
	Signature

When completed, this form should be returned to be retained by child's school. It is NOT necessary to return this form to the NYC DOE.

OPT Form A4-1