



Mountainside Board Of Education

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www.mountainsideschools.org



PARENTAL TRANSPORTATION SERVICES WAIVER FORM STUDENT TRANSPORTATION SERVICES 2024-2025 SCHOOL YEAR

To be completed by the PARENT/GUARDIAN. Please print.

I understand that, if eligible, the Mountainside School District is obligated to transport my child to and from school pursuant to N.J.S.A. 18A:39-1 et seq. In accordance with N.J.S.A 18A:39-1c, I agree to waive said transportation services provided by the Mountainside School District. I understand that I will be responsible for transporting my child, _____ to

(Name of Student)

and from _____ school each school day and that the Mountainside

(School of Attendance)

School District will not be required to provide transportation services to my child for the 2024-2025 school year. I have received and read a copy of the Mountainside District's Transportation Waiver Policy and agree to the terms for waiving transportation services. I understand that I may reinstate my child's transportation services only upon written request and showing a need due to family or economic hardship as defined by the Transportation Waiver Policy.

Parent/Guardian's Signature _____

Parent/Guardian Printed Name _____

Date _____ Phone Number _____

Email Address _____

For District Use Only

Date Waiver Received _____

BOE Notification Date _____