

Marlboro Central School District

Rosanne Mele

Assistant Superintendent for Business and Personnel

Alternative Pick Up/Drop Off Request

1	n to make any changes to dr uest will take up to 3 days t	
	e notified by the bus compar	-
Date:		
Student's Name:		Grade:
Home Address:		
Parent/Guardian Phone(s):	Circle one: cell home work	Circle one: cell home work
The Marlboro Central School FIVE-DAY PER WEEK BA ADDRESS BELOW: [] AM (Trip to School [ASIS ONLY. PLEASE IND	
Address:		
Parent/Guardian Signature:		
<u>To Be</u>	e Completed By Qualit	<u>y Bus</u>
Received: Processed:	: Parents Contacted	I Returned to District:
	Trip #	_
Central Admi	inistration, 21 Milton Turnpike, Phone: (845)236-5803 Fax: (

www.marlboroschools.org