

TRANSPORTATION DEPARTMENT

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Memorandum:

To:

Principals/Transportation Coordinators

From: Lucille Sharp

CMSD Department of Transportation

Date: July 30, 2023

Re:

Transportation

This correspondence is a reminder for you to submit a roster of eligible students for transportation. This year, the Cleveland Metropolitan School District will be transporting all District and non-public student's grades K-8 at one (1) mile or greater for transportation eligibility. Grades 9-12 must reside in Cleveland at one (1) mile or greater to be eligible for RTA Badges. If your student resides out of the boundary for transportation on a school bus, parent reimbursement will be available.

Parents are to submit reimbursement information, including a picture ID and proof of residency, to their school instead of coming to the Transportation office. The school will submit a compiled list of eligible students with all relevant information to Lucille Sharp hand delivery or by mail for Transportation to verify eligibility. Ms. Sharp will be sending the recently updated parent reimbursement forms to your schools. All payment in-lieu-of transportation waiver forms and required documentation must be submitted by October 09,2023.

Please do not hesitate to contact Ms. Sharp at 216.838.0963 with any questions.



Transportation Division

PAYMENT- IN-LIEU OF TRANSPORTATION WAIVER FORM				
Parent/GuardianAddress:		S	School year:	
City:	Stat	e: OH	Zip code:	
Phone:			1 2 3 m 1 2 3	
Name of Students (s):	Grade:	Schoo	l Attending and	d Address:
The Cleveland Metropolitan School Discontagoraph 3327.02 of the Ohio Revised transportation by school conveyance is parent or guardian of said pupil in lieu based upon the reimbursement rate se not exceed the average cost of transpondate: Date: PAREN	d Code, has declar s "impractical" an of providing such t by the Ohio Dep ortation per pupil	red by B d hereb i service partmen in the S	Soard resolution y agrees to pay e. Payment shad t of Education, tate of Ohio.	n that such y the all be
I hereby <u>ACCEPT</u> the decision of said Be transportation, and I agree to provide transportation name above for the consideration name	oard of Education	to offer	payment-in-lieu chool for the stu	of dent(s)
Date:				
	Signature – Parent	/Guardiar		
***************************************			Total Washing	
I hereby <u>REJECT</u> the decision of said E transportation. ** Date:		n to offe	er payment-in l	lieu of
	Signature – Parent/	Guardian		
**Upon rejecting payment in lieu of tr mediation. That mediation will be init written request directed to the approp Department of Education.	ransportation, you	u have t artment	the right to req	ipon your

This form must be signed and returned by October 09, 2023

WHAT IS ACCEPTED AS PROOF OF ADDRESS:

1. WATER BILL 2. ELECTRICITY BILL 3. GAS BILL 4. SEWER BILL 5. LEASE AGREEMENT FOR YOUR RESIDENCE 6. MORTGAGE STATEMENT OR CONTRACT 7. IF LIVING WITH FAMILY OR FRIENDS LETTER HAS TO BE NOTARIZE WITH THE PARENT / STUDENTS NAME AND A COPY OF ONE OF THAT FAMILY OR FRIENDS BILL. WHAT IS ACCEPTED FOR PHOTO ID: **PASSPORT DRIVING LICENSE** STATE ID

NO P.O. BOX ADDRESSES