

## TRANSPORTATION DEPARTMENT

Chief Executive Officer

Dr. Warren G. Morgan II

**Board of Education** 

Sara Elaqad, J.D.

Board Chair

look D. Undert

Leah D. Hudnall Board Vice Chair

Anne E. Bingham Robert W. Briggs, J.D.

Robert M. Heard Sr.

Diana Welch Howell

Denise W. Link Nigamanth Sridhar, Ph.D.

Lisa Thomas, Ph.D.

Ex Officio Members Michael A. Baston, Ed.D., J.D. Laura Bloomberg, Ph.D.

#### <u>MEMORANDUM</u>

To: Principals/Transportation Coordinators

From: Lucille Sharp

CMSD Department of Transportation

Date: Aug 01, 2024

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 school 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 transportation to verify eligibility. Ms. Sharp will be sending the recently update parent reimbursement forms to your schools. All payment in-lieu-of transportation waiver forms and required documentation must be submitted by October 13, 2024.

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



#### Transportation Division

PAYMENH INTELLUOF	TREAVNSPIORE	PAVIMONAVAV	VERFORM
Parent/Guardian	School		
7.4441 C551			
City: Phone:		State: OH	Zip code:
Name of Students (s):	Grade:	School	Attending and Address:
The Cleveland Metropolitan School Disparagraph 3327.02 of the Ohio Revise transportation by school conveyance is parent or guardian of said pupil in lieu based upon the reimbursement rate senot exceed the average cost of transport	d Code, has d s "impractical of providing et by the Obic	eclared by Boll' and hereby such service	oard resolution that such agrees to pay the Payment shall be
Date:			
	Signature - School district official		
PARENT CERTIFICATION			
I hereby <u>ACCEPT</u> the decision of said Board of Education to offer payment-in-lieu of transportation, and I agree to provide transportation to and from school for the student(s) named above for the consideration named.			
Date:			
	Signature – P	arent/Guardian	
I hereby <u>REJECT</u> the decision of said E transportation. **	Board of Educ	ation to offe	r payment-in lieu of
Date:			
	Signature - Pa	rent/Guardian	
**Upon rejecting payment in lieu of transportation, you have the right to request mediation. That mediation will be initiated by the Department of Education upon your written request directed to the appropriate Area Coordinator's office of the Ohio Department of Education.			

This form must be signed and returned by October 13, 2024

### 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