

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES AND STATE EDUCATION DEPARTMENT
**INDIVIDUAL TRANSPORTATION PLAN
FOR A STUDENT IN FOSTER CARE**

Student's name:

Student's date of birth: / /

Student's current grade level:

School to be attended (address):

Foster care placement address (address from which transportation will be provided):

School district of origin:

School district of residence, now designated district of attendance (where different from district of origin):

Date of best interest determination (BID) document received: / /

Date of *Individual Transportation Plan for a Student in Foster Care* completion: / / .

(within two to three business days for in-district, or five to seven business days for out-of-district of notification of BID)

Date transportation must commence: / /

(within **two to three** business days for in-district or **five to seven** business days for out-of-district of notification of BID)

Transportation plan reviewed annually: Date(s): / / , / /

Local Department of Social Services (LDSS) Information

Name of LDSS:

LDSS POC telephone and email:

Other (i.e., nonprofit, voluntary agency, etc.) with name and contact info:

District of Attendance Contact Information

Superintendent:

Telephone and email:

LEA POC:

Telephone and email:

Transportation director (or equivalent):

Telephone and email:

Transportation employing agency (if not school district):

District of Origin Contact Information (if applicable)

Superintendent:

Telephone and email:

LEA POC:

Telephone and email:

Transportation director (or equivalent):

Telephone and email:

Approved Transportation Plan

(Until further revisions due to a change in services or a new school year)

Once the regular transportation arrangements are made, the child will (check appropriate box):

- Walk (only if this is consistent with home-to-school travel policy for students living a similar distance from school)
- Use public transportation (only if this is consistent with home-to-school travel policy for students in similar circumstances)
- School-operated or contracted travel on a bus or other vehicle
 - a. If school-operated or contracted travel is the choice above, the student will travel on a vehicle owned and operated by:
 - b. If a transfer between school buses is necessary, please describe:
 - c. This is existing route # (where applicable)
- Private transportation services provided by the child welfare agency

These transportation procedures were agreed to on the following date: / /

Authorized Signature for District of Attendance (if not district of origin):
Authorized Signature for District of Origin (only needed for student who has IEP with transportation as a related service):