



**OFFICE OF PUPIL TRANSPORTATION**  
**Alexandra Robinson, M.Ed. CDPT, Executive Director**  
 44-36 Vernon Boulevard  
 Long Island City, NY 11101  
 Telephone: (718) 392-8855  
 Fax: (718) 482-3702

## 4:00 PM and After School Transportation Service Request Form

**2014—2015 School Year**

Note: Please complete an *individual* Service Request Form for *each* separate school location.

School name		ATS Code (if any)	OPT Code (if any)
Address Street number                      Street name		Borough <input type="checkbox"/> BK <input type="checkbox"/> BX <input type="checkbox"/> MN <input type="checkbox"/> QN <input type="checkbox"/> SI	
City		<b>NY</b>	Zip Code
Transportation coordinator's name Last name              First name              MI		Transportation coordinator's e-mail address	
Primary telephone number		Alternate telephone number	
Principal's name Last name              First name              MI		Principal's e-mail address	
Primary telephone number		Alternate telephone number	
Are any services now provided to your school by OPT? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, what "full fare" service(s) is/are now provided? <input type="checkbox"/> GE busing <input type="checkbox"/> SE busing <input type="checkbox"/> MetroCards <input type="checkbox"/> Reimbursement	
<input type="checkbox"/> Check here if you are requesting bus service with the same AM & PM stops	<input type="checkbox"/> Check here if you are requesting PM bus stops at 600' from pupils' homes	<input type="checkbox"/> Check here if you are requesting reimbursement for your own GE service	
If the school is requesting reimbursement for its own bus service, please provide: Company name: _____ NYS DOT ID Number: _____			
Please provide an estimate of the number of students expected to use bus service after 4:00 PM:			
Signature of principal or designee		Title	Date

**Session times are required for OPT-provided services. Please contact your OPT Account Manager for assistance.**

**For other assistance, contact OPT Customer Service at 718-392-8855**

**To submit this request, e-mail this form to [TransportSchedule@schools.nyc.gov](mailto:TransportSchedule@schools.nyc.gov) not later than July 1, 2014**