**The Commonwealth of Massachusetts**

Dept. of Early Education & Care

Small Group and Large Group Transportation Plan and Authorization

Child’s name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MY CHILD WILL ARRIVE AT THE PROGRAM**:

\_\_\_PARENT DROP OFF

\_\_\_SUPERVISED WALK

\_\_\_UNSUPERVISED WALK

\_\_\_PUBLIC/PRIVATE/VAN

\_\_\_PROGRAM BUS/VAN

\_\_\_CONTRACT/VAN

\_\_\_PRIVATE TRANS. ARRANGED BY PARENT

\_\_\_OTHER

**MY CHILD WILL DEPART FROM THE PROGRAM**:

\_\_\_PARENT PICK UP

\_\_\_SUPERVISED WALK

\_\_\_UNSUPERVISED WALK

\_\_\_PUBLIC/PRIVATE/VAN

\_\_\_PROGRAM BUS/VAN

\_\_\_CONTRACT/VAN

\_\_\_PRIVATE TRANS. ARRANGED BY PARENT

\_\_\_OTHER

Parent signature & Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_