

**CONTRACT BETWEEN FRANKLIN CITY SCHOOLS BOARD OF EDUCATION AND  
PARENT/GUARDIAN TO PROVIDE TRANSPORTATION  
2024-2025 SCHOOL YEAR**

**For: (Print Student's Name):** \_\_\_\_\_

**Grade:** \_\_\_\_\_ **School Attending:** \_\_\_\_\_

**School Address:** \_\_\_\_\_

The Board of Education of Franklin City Schools upon recommendation of the Superintendent has determined that the above-named pupil is eligible to receive transportation in accordance with Section 3327.01 of the Ohio Revised Code, State Board Standards, and District Board Policy. The Board of Education/Superintendent has further determined that such service by school conveyance is “impractical” and hereby offers to pay the parent or guardian of said pupil in lieu of providing such service. The minimum amount determined by the Department of Education and Workforce for the 2024-25 school year will be the payment in lieu of transportation payment to you. The following reason(s) were considered in the determination that transportation is impractical:

- The time and distance required to provide the transportation;
- The number of pupils to be transported;
- The cost of providing transportation in terms of equipment, maintenance, personnel and administration;
- Whether similar or equivalent service is provided to other pupils eligible for transportation;
- Whether and to what extent the additional service unavoidably disrupts current transportation schedules; and
- Whether other reimbursable types of transportation are available.

Parents/guardians must indicate whether they accept or reject the offer of payment in lieu of transportation by checking the appropriate box next to their selection and must return a signed contract by the date indicated in the notice. ***This contract must be completed, signed and returned by November 1, 2024.*** Failure to return this form by the deadline will be interpreted as a withdrawal of your request for transportation services.

**PARENTS OR GUARDIANS must choose one of the options below:**

- I hereby agree to provide transportation to and from school for the student named above for the 24-25 school year for the consideration named above.
- I reject the offer of payment in lieu of transportation provided by Franklin City Schools. I understand that I may request mediation through the Office of Pupil Transportation of the Ohio Department of Education.

**Print Parent/Guardian's Name:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_ **Date:** \_\_\_\_\_

**BOARD OF EDUCATION USE ONLY**

**Signature of TREASURER:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of PRESIDENT Board of Education:** \_\_\_\_\_ **Date:** \_\_\_\_\_