DAYCARE PROVIDER INFORMATION 2025-2026 SCHOOL YEAR

Original signed form must be submitted to the district office located at 102 S Cedar Rd.

My child will be attending a dayon Beginning:First	care/babysitter for the 2025-2026 school year st Day of SchoolOther:
Student name:	Specify date
	der:
Babysitter/Daycare address:	
•	residence):
Babysitter/Daycare phone number:	
•	nature:
Parent / Guardian Signature:	
I would like New Lenox School Distri	ct 122 to transport my child from:
☐ daycare provider	☐ Neither, Daycare/Parent will transport
☐ Before & After School ☐ Before School Only - After ☐ Home ☐ After School Only - Before ☐ Home ☐ Wote: District Transportation by the District	xed, Transportation for this daycare provider is (check one): school my child will need to be transported <i>TO</i> : □ Other (specify) school my child will need to be transported <i>FROM</i> : □ Other (specify) tion is from one location only for AM and one for PM. rict is for 5 days a week. There are NO EXCEPTIONS. transportation for any change in the agreed arrangement.
	ferent than home school?Yes*No undary Variation form MUST be filled out.
signatures. Signatures signify tPlease Note:Any change is a permanent cl	aycare provider could affect the school your child attends, or the
	FOR OFFICE USE ONLY:copy sent to building
	copy sent to transportation
Pov. 2/1/2025	

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