EXHIBIT A

DESIGNATION OF ALTERNATE LOCATION FOR TRANSPORTATION

As permitted by state la	aw, I wish to designate (check one):	
the child-care fa	ncility (name of facility)	
at (street addre	ss)	
the residence of	f my child's grandparent, (name of grandparent)	
	, at (address)	
as the regular location	for the purpose of my child, (name of child),	
	, to obtain District transportation to and from school.	
Parent/Guardian: _		
Address: _		
Day Phone Number: _		
Date: _		