



## Parker Elementary Transportation Change Request Form – Porters Community Center

The City of Gainesville - Parks, Recreation and Cultural Affairs (PRCA) education program, offers The After-School Program to elementary and middle school children.

The After-School Program operates on the Alachua County Public School (ACPS) calendar for the current year. The ACPS calendar and school hours can be found at https://www.sbac.edu.

The After-School Program hours are 2:00 p.m. – 6:00 p.m., Monday through Friday; The program hours are 1:00pm – 6:00pm every Wednesday for early release.

Transportation is not provided by PRCA for enrolled participants at the Porters program site. However if a student attends Parker Elementary and enrolls at the Porters program site, you may complete this form to request school bus transportation to the Porter's Site. This form must be submitted directly to Martha Horter at Parker Elementary for approval. You will be notified directly by the school when your transportation change is approved, and the date your child is able to take the bus to the Porters program site.

Return this form to Martha Horter via:

- -Email: horterma@gm.sbac.edu
- -Fax: 1-855-585-9513
- -In person by returning it to Parker Elementary

## **Program Site**

- Porters Community Center located at 512 SW 2nd Avenue, 352-334-3366.

## **Transportation Assignments**

Elementary students in grades  $1^{st} - 5^{th}$  who are enrolled at the Porter's Site are walked by PRCA staff from the ACPS designated bus stop at the corner of SW  $3^{rd}$  Street and SW  $6^{th}$  Avenue to The After-School Program.

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A new application must be submitted each program year. Space is limited and applications are processed on a first come, first serve basis. Please complete one request form for each enrolled participant. Return the completed application to Martha Horter at Parker Elementary who can be reached at (352) 955-6705.				
□ I have enrolled my child at the Porters Site of The After change to allow my child to ride the bus after school to	er-School program, aı			
Participant Information				
Name				
Address				
City	State	Zip		
Primary Phone	Secondary Phone			
Email				
School Information (for 2025-26)				
Name of School	Grade			
Address				
City	State	Zip		
Emergency Contact				
Name	Relationship			
Primary Phone	Secondary Phone			
Printed Name of Parent/Guardian				
Signature of Parent/Guardian		Date		

Office Use Only				
Transportation Request (circle one): Approved	Denied			
Date Transportation Change Effective:	Date PRCA Staff Notified:			
Signature of Approver:				