



Catskill Area School Study Council

A partnership between SUNY Oneonta and area school districts since 1951; serving schools in the Otsego Northern Catskills BOCES and the Delaware-Chenango-Madison-Otsego BOCES

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To: Superintendents and Transportation Supervisors
From: Suzanne Swantak-Furman
Subject: School Bus Drivers' **Spring 2024** 30-Hour Basic Course
Date: December 2023

The basic 30-hour course for school bus drivers will begin on **Friday, April 12th** in the ETC room at the **Otsego Area Occupational Center in Milford**. Kenneth Starr will be the instructor. His contact information is kmstarr@vestal.k12.ny.us.

This course meets the regulations of the New York State Education Department, which requires that each school bus driver completes a course of instruction in school bus safety within the first year of employment. The New York State Education Department curriculum is followed and meets section 156.3 regulations. Participants are eligible for point and insurance reduction. Enrollees are awarded a Certificate of Completion by the State Education Department upon successful completion of all requirements.

Classes have been scheduled for the following dates and times:

Friday, April 12	6:30 PM - 9:30 PM
Saturday, April 13	8:00 AM - 5:00 PM
Friday, April 19	6:30 PM - 9:30 PM
Saturday, April 20	8:00 AM - 5:00 PM
Friday, April 26	6:30 PM - 9:30 PM
Saturday, April 27	8:00 AM - 5:00 PM

**Attendance at every class is required to receive a certificate of completion*

Below list the names of the drivers who will be attending from your district and their driver's license number.. Have your Superintendent sign it and write the school district's name. Please email this form to cpalm@oncbooces.org by **Monday, March 25, 2024**.

Required: Include a copy of each participant's Driver's License with this registration-FRONT AND BACK!

Registrant Name(s):	Driver's License Number	Driver's Cell #
_____	_____	_____
_____	_____	_____
_____	_____	_____

School District: _____

Transportation Director: _____ **Cell #:** _____

District Superintendent **Date**