

SOUTH ORANGETOWN CENTRAL SCHOOL DISTRICT

TRANSPORTATION DEPARTMENT

160 Van Wyck Rd, Blauvelt, NY, 10913

845-680-1663 Fax: 845 680 1972

Request for Transportation to Private School

Form must be received by the *Transportation Department* by April 1st of attending school year. The district will adhere to and enforce this cut-off date and cannot guaranty transportation if form is received after April 1st. *****Students must be registered in the South Orangetown Central School District prior to receiving transportation services.*****

****Proof of student residency must be provided via lease, mortgage statement, etc.****

****School to which student requests transportation MUST be within 15 miles of the child's residence**

Student Name: _____

Address: _____

City, State: _____ Zip: _____

Guardian #1 Full Name & Daytime Phone: _____

Guardian #1 Email: _____

Guardian #2 Full Name & Daytime Phone: _____

Guardian #2 Email: _____

Emergency Contact Name and Number: _____

Age (must have proof child is at least 5 years old by Dec 1st of school year): _____

Date of birth: _____ Present grade: _____

School Presently Attending: _____

School Year You are Applying for Transportation to: _____

Private/Parochial School: _____

School Address: _____

School Phone #: _____ First day of school: _____

Time Classes Begin: _____ Dismissal Time: _____

Signature of Parent/ Guardian

Date

FOR OFFICE USE ONLY

Form Received By: _____

Date: _____

Mileage from Student's home to Private School: _____