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| 196 Main Street, New Paltz, New York 12561 • Phone: (845)256-4070 • Fax: (845)256-4079 • www.newpaltz.k12.ny.us |
| **Kelli Ricci** |  **Maureen Ryan** |  **Jean Bain** |
| *Assistant Director of Transportation* |  *Director of Transportation* | *School Bus Dispatcher* |

**2019/2020 TRANSPORTATION REQUEST FOR PRIVATE/PAROCHIAL SCHOOLS**

In accordance with the Laws of the State of New York, I hereby formally request

transportation for my child to the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School.

Child's Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade Entering\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_\_\_\_\_\_\_

Address: House # and Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (PO Box Numbers Unacceptable; Please Indicate House # and Street)

 City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Home Telephone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Emergency Telephone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

THE NEW PALTZ CENTRAL SCHOOL DISTRICT DOES NOT TRANSPORT TO PRIVATE/PAROCHIAL SCHOOLS ON DAYS IN WHICH THE DISTRICT IS CLOSED FOR STUDENTS.

A request must be completed for each child and submitted on or before April 1, 2019 as established by Education Law Section 3635. Students who register for Kindergarten must meet the same requirements as students attending New Paltz Central School District.

SCHOOL ATTENDED BY YOUR CHILD IN THE 2018/2019 SCHOOL YEAR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **(FOR TRANSPORTATION OFFICE USE)**

DATE RECEIVED \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

MILEAGE DISTANCE FROM HOME TO SCHOOL 15 MILES AND UNDER\_\_\_\_ MORE THAN 15 MILES\_\_\_\_

 IF MORE THAN 15 MILES, STATE MILEAGE HERE\_\_\_\_\_

TRANSPORTATION APPROVED\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DISAPPROVED\_\_\_\_\_\_\_\_\_\_\_\_\_

 revised 1/16/19