

PRIVATE SCHOOL TRANSPORTATION FORM FOR SOUTH COUNTRY CSD

TRANSPORTATION REQUEST FOR 2018-2019

My child resides in the South Country Central School District. In accordance with the laws of the State of New York, I hereby formally request transportation for my son/ daughter to:

NAME OF SCHOOL	SCHOOL HOURS
ADDRESS OF SCHOOL	SCHOOL PHONE #
CITY STATE ZIP CODE	TODAY'S DATE

In addition, I hereby notify you that I have authorized the Principal of the above mentioned school to act as my representative in requesting transportation this coming year. The authorization is valid until revoked.

PARENT OR GUARDIAN SIGNATURE	PHONE NUMBER	
EMERGENCY CONTACT	RELATIONSHIP TO STUDENT	EMERGENCY PHONE #

STUDENT INFORMATION

PUPIL'S NAME	DATE OF BIRTH	GRADE (17-18)
ADDRESS	NEAREST CROSS STREET	
CITY STATE ZIP CODE	LAST YEARS BUS STOP	

IMPORTANT: Transportation request forms must be submitted prior to April 3, 2018. FAILURE TO COMPLY MAY MEAN DENIAL OF TRANSPORTATION. DO NOT RETURN THIS FORM TO THE SCHOOL. Requests received after April 3, 2018 MUST have a letter explaining the reason for applying for transportation late and are subject to availability of room on the bus.

ALL STUDENTS MUST BE REGISTERED IN THE SOUTH COUNTRY CENTRAL SCHOOL DISTRICT IN ORDER TO RECEIVE TRANSPORTATION AND TEXTBOOKS. A TRANSPORTATION REQUEST FORM MUST BE COMPLETED FOR EACH CHILD.

PLEASE RETURN FORMS TO: EAST END BUS COMPANY- 3601 Horseblock Rd, Medford, NY 11763 Attn: Lorraine