



# NEW HYDE PARK-GARDEN CITY PARK UNION FREE SCHOOL DISTRICT

DIRECTOR OF FACILITIES  
AND TRANSPORTATION

Phone: 516-434-2318  
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1950 Hillside Ave.  
New Hyde Park, NY 11040

## Transportation Application Non-Public Schools – School Year 2018 – 2019

(PLEASE FILL OUT ONE APPLICATION FOR EACH CHILD)

**YOU ARE REQUIRED TO FILE A NEW APPLICATION EACH YEAR THAT YOU REQUEST TRANSPORTATION**

**THIS FORM MUST BE RETURNED TO THE NEW HYDE PARK-GARDEN CITY PARK U.F.S.D. TRANSPORTATION OFFICE AT THE ABOVE ADDRESS NO LATER THAN APRIL 1, 2018.** In accordance with the Education Law of the State of New York, Section 3635, late applications for transportation to non-public schools, or changes to applications, will not be approved after the **April 1<sup>st</sup> deadline.**

Transportation **will not** be provided on the following days, unless the New Hyde Park-Garden City Park U.F.S.D. is in session: Columbus Day, Veterans Day, Thanksgiving Day & the Day After Thanksgiving, Christmas Eve Day, Christmas Day, New Year's Day, Martin Luther King Day, President's Day and Memorial Day.

I hereby formally request transportation for the student listed below: **(Please Print All Information Legibly)**

Student's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Who resides at \_\_\_\_\_

Will be attending \_\_\_\_\_ School, Located at \_\_\_\_\_

In the Town of \_\_\_\_\_ Telephone No. (School) \_\_\_\_\_

Grade for 2018 – 2019 \_\_\_\_\_ School Hours \_\_\_\_\_

Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_

Today's Date \_\_\_\_\_ Parent/Guardian Name (Print) \_\_\_\_\_

E-mail address \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

Home Telephone No. \_\_\_\_\_ Parent/Guardian Signautre \_\_\_\_\_

### Emergency Contacts

#1 Name \_\_\_\_\_ Phone No. \_\_\_\_\_ Relationship \_\_\_\_\_

#2 Name \_\_\_\_\_ Phone No. \_\_\_\_\_ Relationship \_\_\_\_\_

#3 Name \_\_\_\_\_ Phone No. \_\_\_\_\_ Relationship \_\_\_\_\_

**PLEASE NOTE:** Buses to Non-Public schools are shared by various school districts. Routes are planned by the bus companies in the most direct and economical manner, both to and from school. Routes are not affected by a student's district of residence.

### ATTACH A COPY OF PROOF OF RESIDENCY

1. Mortgage Statement Deed, or County and School Tax Receipt **OR**  
An Apartment Lease – Must be signed by both parties.

2. New applicants will be required to show proof of age (Birth Certificate) in person.

If the student is not living with parents, the following are accepted as proof of legitimate residence:

1. A court order showing the individual as the legal guardian for the child **OR**
2. A letter from Social Service Department or other Agencies showing the individual as the Foster Parent.

**ALL DOCUMENTS SUBMITTED MUST SHOW THE NAME AND ADDRESS OF RESIDENT.**