

SMITHTOWN CENTRAL SCHOOL DISTRICT
26 NEW YORK AVENUE, SMITHTOWN, NEW YORK 11787-3435
TRANSPORTATION
(631) 382-4100

January 1, 2018

To the parent or guardian of:

Dear Parent/Guardian:

Enclosed you will find the private and parochial transportation application for the 2018–2019 school year for all Smithtown Central School District students.

Any returning students who have no changes from last year may fill out the enclosed form and mail it as directed on the application prior to the April 1st deadline.

All newly registering students attending private or parochial schools or any returning private and parochial students who have changes to their school or address will need to register in person with the Smithtown Central School District in order to be considered for transportation, receive textbooks, and/or other educational services.

In order to meet the April 1st transportation application deadline, registration for new private and parochial students is taking place at the Joseph M. Barton Building, located at 26 New York Avenue, Smithtown. Registration will be held Monday through Friday from 8:30 am to 3:30 pm.

If you have any questions or concerns regarding transportation, please call the Transportation Department at 631-382-4100. Should you have questions regarding registration, necessary documentation or any other concerns, please call the Central Registration Office at 631-382-2024.

Sincerely,

Mary Augugliaro

Transportation Supervisor

MA/df
encl.

SMITHTOWN CENTRAL SCHOOL DISTRICT
APPLICATION FOR PRIVATE AND PAROCHIAL SCHOOL TRANSPORTATION

THIS FORM MUST BE FILED PRIOR TO APRIL 1 PRECEDING THE NEW SCHOOL YEAR

***New Private & Parochial students or anyone changing school or address must register in person at
SCSD Central Registration Office- 26 New York Ave Smithtown 11787.**

**Returning Private & Parochial students, without any changes from last year, may mail their completed application to
26 New York Ave Smithtown 11787 (attn: Transportation)**

DATE OF APPLICATION _____

NAME OF STUDENT _____
(Last) (First)

LEGAL ADDRESS: _____
(Street) (Town) (Zip)

DATE OF BIRTH: ___/___/___ GRADE ENTERING IN SEPTEMBER 2018 _____

NAME OF PARENT/GUARDIAN: _____

HOME NUMBER: _____ WORK NUMBER: _____

EMERGENCY CONTACT NAME: _____ CONTACT NUMBER: _____

SCHOOL THE STUDENT IS CURRENTLY ATTENDING OR TRANSFERRING FROM: _____

TRANSPORTATION INFORMATION

In accordance with the laws of New York State, I hereby formally request transportation for my child to:

NAME OF SCHOOL: _____

ADDRESS OF SCHOOL: _____

For the school year 2018-2019 School Hours _____

IMPORTANT – PLEASE NOTE THE FOLLOWING REQUIREMENTS:

***ANY NEW RESIDENT REQUESTING TRANSPORTATION TO A PRIVATE AND PAROCHIAL SCHOOL OR ANYONE WITH A CHANGE OF ADDRESS MUST PROVIDE THE PROPER DOCUMENTATION AS DESIGNATED BY SCSD CENTRAL REGISTRATION OFFICE**

PROOF OF RESIDENCY MUST BE SUBMITTED PRIOR TO PROCESSING A TRANSPORTATION REQUEST.

***Entering kindergarten students must be 5 years of age by December 1, 2018
in order to be considered for transportation.***

ROUTE# _____
STOP ASSIGNED _____

SIGNATURE OF PARENT OR GUARDIAN

LONGWOOD CENTRAL SCHOOLS

35 YAPHANK-MIDDLE ISLAND ROAD • MIDDLE ISLAND, NEW YORK 11953-2373

MICHAEL R. LONERGAN, DSW
Superintendent of Schools

GALE WINSPER
School Transportation Coordinator



OFFICE OF TRANSPORTATION
21 Everett Drive
Yaphank, New York 11980
631-345-2775 • Fax 631-345-2818

January 12, 2018

Parents' of Private Schools Students:

Enclosed, please find the 2018-2019 application for requests for transportation to non-public school that needs to be submitted to the Longwood Transportation office by April 1, 2018. **Please be advised that this form must be submitted by this date.**

Longwood Transportation needs this information to make sure that we budget sufficient vehicles, therefore even if you feel that you may not be sending your child to a private school, or are waiting for acceptance, it is imperative that you still apply for transportation.

Failure to apply for transportation by the April 1st deadline may result in your student not receiving transportation services for the 2018-2019 school year.

If you have any questions regarding this matter, please do not hesitate to contact this office at the above number.

Thank you for your cooperation.

Sincerely,

A handwritten signature in cursive script that reads "Gale Winsper".

Gale Winsper
Transportation Coordinator

PLEASE NOTE: THE EMERGENCY CONTACT INFORMATION FOR STUDENTS TAKING LARGE BUSES: SUFFOLK TRANSPORTION (631)732-3200; FOR STUDENTS WITH MINI BUS TRANSPORTATION THE EMERGENCY CONTACT INFORMATION: EAST END BUS LINES (631) 345-9600.

cc: J. Bryan

memo.parent p&p jan. letter

www.longwood.k12.ny.us
Community Unity...Be A Part Of The Pride

LONGWOOD CENTRAL SCHOOL DISTRICT

APPLICATION FOR PRIVATE AND PAROCHIAL SCHOOL TRANSPORTATION

Requests for transportation to non-public school must be filed in writing with the Longwood Board of Education by April 1, 2018 for the 2018-2019 school year. Parents are advised to file even if admission to the non-public school is still in question. To qualify for transportation, the school must not be further than 15 miles from the child's home. The formal application must be submitted annually. This application must be returned by April 1, 2018 to:

LONGWOOD CENTRAL SCHOOL DISTRICT
TRANSPORTATION DEPARTMENT
21 EVERETT DRIVE
YAPHANK, NEW YORK 11980

FAX #: 631-345-2818

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PUPIL INFORMATION (Please Print Clearly)

DATE OF APPLICATION _____

NAME OF STUDENT _____

(Last)

(First)

LEGAL ADDRESS _____

(Street)

(Town)

MAILING ADDRESS _____

DATE OF BIRTH * ____ / ____ / ____

GRADE ENTERING IN SEPTEMBER 2018 _____

NAME OF PARENT/GUARDIAN _____

HOME NUMBER _____

WORK NUMBER _____

CELL # _____

EMERGENCY CONTACT NAME _____

CONTACT NUMBER _____

SCHOOL THE STUDENT IS CURRENTLY ATTENDING/TRANSFERRING FROM _____

*Please note: A copy of your child's birth certificate must be submitted with this application if your child is entering school for the first time.
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TRANSPORTATION INFORMATION

In accordance with the laws of New York State, I hereby formally request transportation for my child to:

NAME OF SCHOOL: _____

ADDRESS OF SCHOOL: _____

****If entering Kindergarten, please circle which session – A.M., P.M. or Full Day**

IMPORTANT – PLEASE NOTE THE FOLLOWING:

ANY NEW RESIDENT APPLYING FOR PRIVATE AND PAROCHIAL TRANSPORTATION MUST PROVIDE PROOF OF RESIDENCY IN THE FORM OF A DEED, MORTGAGE STATEMENT, TAX BILL OR LEASING AGREEMENT. IN THE EVENT NONE ARE AVAILABLE, THEN A NOTARIZED STATEMENT OF RESIDENCY FORM "AFFIDAVIT OF LANDLORD" (which may be obtained at the Longwood Central Registration Office) **MUST BE SUBMITTED PRIOR TO PROCESSING A TRANSPORTATION REQUEST.**

An application is late if it is filed after April 1, 2018 or if filed more than 30 days after establishing residence in the Longwood Central School District. In this event, the application must be completed by the parent/guardian providing a "reasonable explanation for the delay" as required by Chapter 719 of the Education Law as amended.

 SIGNATURE OF PARENT/GUARDIAN _____

DATE _____

**COMMACK PUBLIC SCHOOLS
TRANSPORTATION DEPARTMENT
P.O. BOX 150
COMMACK, NEW YORK 11725
Phone: 631-912-2020 Fax : 631-912-2051**

Dear Parent/Guardian:

In accordance with NYSED, Commack School District can only provide transportation services to students according to the Commack School District's calendar.

Instructions for completing your application for private and parochial transportation requests are as follows:

- ◆ The application form on the back of this letter must be completed in its entirety. If there is any missing information, including school's address, the form will be returned;
- ◆ Only one registrant per application form;
- ◆ Please **PRINT** all information;
- ◆ The applications must be returned to Commack School District's Transportation Office no later than **April 1st** – failure to do so can result in denial of transportation services;
- ◆ If you are registering a Kindergarten student, you must enclose a copy of the child's birth certificate;
- ◆ If your child is "latch key", meaning that your child can let himself/herself in your home without adult supervision, please designate;
- ◆ Again, the completed application must be returned to arrive in the Transportation Office, by **April 1st**.

Thank you for your cooperation.

COMMACK PUBLIC SCHOOLS
TRANSPORTATION DEPARTMENT
P.O. BOX 150
COMMACK, NEW YORK 11725
Phone: 631-912-2020 Fax: 631-912-2051

PRIVATE & PAROCHIAL TRANSPORTATION REQUEST

I hereby formally request transportation for my son/daughter for the 2018/2019 school year to:

Please print all information:

Name of School

Address & Telephone Number of School

Student's Name: _____

Address: _____

Town: _____

Grade (as of 9/18): _____ Birthdate: _____

Parent or Guardian: _____

Home Phone: _____ Cell/Beeper #: _____

Work Phone: 1. _____ 2. _____

Emergency Phone: 1. _____ 2. _____

Emergency drop off information (Must be completed):

Name: _____

(must be within Commack School District's boundary)

Address: _____ Phone: _____

Latch Key: _____ Yes _____ No

**** Please enclose copy of birth certificate for all Kindergarten students****

**Forms must be returned to above address by
April 1st deadline.**

Parent's Signature

Date