

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

January 1, 2017

Dear Parent/Guardian:

Enclosed you will find the private and parochial transportation application for the 2017–2018 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 9:00 am to 4:00 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 2017 _____

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 2017-2018 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, 2017
in order to be considered for transportation.***

ROUTE# _____
STOP ASSIGNED _____

SIGNATURE OF PARENT OR GUARDIAN