

2010-11 STUDENT TRANSPORTATION REQUEST

RETURN FORM TO:

NORTH SHORE SCHOOL TRANSPORTATION DEPARTMENT
340 SHORE RD, PO BOX 412, GLENWOOD LANDING, NY 11547-0412
(516) 277-7930

(NOTE TO PARENTS: THIS FORM IS SUPPLIED TO PRIVATE AND PAROCHIAL SCHOOLS FOR DISTRIBUTION IN EARLY JANUARY.)

In accordance with the Laws of the State of New York, I am formally requesting transportation during the next school year.

The pupil(s), for whom I am requesting transportation, legally reside(s) in the North Shore School District and will be five (5) years of age no later than December 1, 2010 (for KINDERGARTEN).

Street Address: _____
City: _____ Zip: _____ Home Telephone: _____
Work Telephone: _____ Emergency Telephone: _____

Signature of parent or guardian: _____ Date: _____

PLEASE PRINT

SCHOOL: _____
Student First Name: _____ Last Name: _____
Date of Birth: _____ Grade Entering: _____

SCHOOL: _____
Student First Name: _____ Last Name: _____
Date of Birth: _____ Grade Entering: _____

SCHOOL: _____
Student First Name: _____ Last Name: _____
Date of Birth: _____ Grade Entering: _____

NOTE: All Transportation Requests must be submitted in person at the Transportation Department by April 6, 2010 or sent by CERTIFIED MAIL POSTMARKED ON or BEFORE APRIL 6, 2010. Failure to submit this transportation request form on or before April 6, 2010 will result in your child being ineligible for district transportation for the 2010-11 school year. In this case, the cost and the arrangement for transportation will be parental responsibility. There can be NO exceptions.