

Newfane Central School District

For School Year:

6273 Charlotteville Road Newfane, NY 14108 716.778.6888

Non-Public Transportation Service Request

The following requirements must be met prior to receiving transportation.

- 1. A separate form must be completed for each child receiving transportation;
- 2. The district requires proof of residency to accompany all requests. A photo identification of the parent/guardian that includes the current address may be acceptable.
- 3. This form is to be completed and returned prior to April 1st of the year prior to requesting transportation.

Please mail or drop off completed request form to: Central Registration

6048 Godfrey Road Burt, NY 14028

| Date of Request: | | For School Year: | |
|-----------------------|--|-------------------------|--|
| Student Name: | | Date of Birth: | |
| Student Address: | | L | |
| Phone: (Cell): | | Start Date: | |
| Parent Email Address: | | | |
| Transport to: | | Grade: | |
| | signing this statement, am attesting that reporting documentation is false, costs to tra (Signature of Parent or Lega | nsport to the non-publi | |
| | _ | | |

TRANSPORTATION OFFICE USE ONLY - do not write below this

| A.M. Route # | A.M. Est. | A.M. Pickup | |
|--------------|--------------|--------------|--|
| | Pickup Time | Location | |
| P.M. Route # | P.M. Est. | P.M. Dropoff | |
| | Dropoff Time | Location | |
| Date | Date School | Date Parent | |
| Processed | Notified | Notified | |