



Southern Cayuga Central School

Transportation Department
2384 State Route 34B
Aurora, NY 13026

Request for Transportation for Nonpublic/Private School

Student: _____ Date of Birth: _____ Grade: _____

Mailing Address: _____ Physical Address: _____
(if different from mailing) _____

Parent/Guardian : _____ Parent/Guardian : _____

Phone Number: _____ Phone Number: _____

Email: _____ Email: _____

School of Attendance: _____

This form must be submitted by **April 1** each calendar year, or **within 30 days** of moving into the district, for the students listed above who attend a nonpublic/private school. Under section 3635 of Education Law, students may receive transportation when their residence is more than two miles and not more than fifteen miles from their school of attendance. In cases where residency is outside of the fifteen mile limit, we will implement a centralized pickup point, or group stop. In these instances, we will discuss available locations and parameters with the parent/guardian prior to the start of transportation.

In accordance with the laws of the State of New York, I; _____,
Parent/Guardian Name (printed)

hereby request transportation for my child(ren) that are listed above.

Sincerely,

Parent/Guardian Signature

Please remit to:
Southern Cayuga Central School
Attn: Transportation Department
2384 State Route 34B
Aurora, NY 13026
315-364-7683 (fax)

Alternate Site: Other than Home
AM Location: _____
AM Address: _____
PM Location: _____
PM Address: _____
Contact Name: _____
Contact Number: _____