

February 2018

The Honorable Andrew M. Cuomo
Governor of New York State
NYS State Capitol Building
Albany, NY 12224

via email and/or Fax: gov.cuomo@chamber.state.ny.us Fax # (518) 474-1513

or go to Change.org petition at: <http://bit.ly/2E8WsFy>

Dear Governor Cuomo, Legislators, the Regents, and State Education Department Leadership:

As residents of the Port Chester-Rye Union Free School District, we call upon you to provide equitable Foundation Aid funding to our District.

Foundation Aid was established to ensure that all students receive their constitutionally guaranteed right to a sound and basic education regardless of their zip code. The failure to adhere to the original 2007-08 Foundation Aid formula has **cut our state aid by more than \$168 million** over ten years at a time when costs have risen and **our enrollment has grown by more than 800**.

Port Chester is a high needs district. 70% of our students qualify for Free and Reduced lunch and 27.4% require ELL services. Worse yet, Port Chester will receive only 44.75% of its rightful Foundation Aid allocation for 2017-2018. To deal with reductions in funding and increased enrollment we have significantly increased class sizes, eliminated elementary school librarians and art teachers, cut reading, computer education and 10 class size reduction teachers, reduced or eliminated extended-day programs, redistricted students to save on transportation and address overcrowding, limited athletic offerings and contests, reduced club offerings, limited Advanced Placement course options, and postponed critical technology upgrades. Due to overcrowding we are currently forced to rent space to house 12 classrooms for more than 300 children.

Substantial cuts to programs and taxpayer stress could have been avoided if we had received equitable funding over the past ten years. We request that New York State remediate this inequity for the 2018-2019 budget cycle and beyond by instituting the equitable distribution of Foundation Aid to our school district.

Name _____

Signature _____

School child attends _____

Email address (optional) _____

School District: Port Chester-Rye UFSD

Cc:

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