



*Building Bridges for today's students to cross into tomorrow's world with equity, innovation and optimism*

**Transportation Office** • 13A Dickinson Avenue • Nyack, NY 10960 • (845) 353-7041  
Fax: (845) 353-7087 • Email: [transportation@nyackschools.org](mailto:transportation@nyackschools.org) • [www.nyackschools.org](http://www.nyackschools.org)

**2019 – 2020**

**REQUEST FOR TRANSPORTATION TO PRIVATE & PAROCHIAL SCHOOLS**

***District Requirements:***

- ✓ All students grades **K-8** living less than fifteen (**15**) miles and more than (**1**) one mile and all students grades **9-12**, living less than fifteen (**15**) miles and more than one and one-half (**1.5**) miles from said schools will be transportation eligible-provided all application requirements are met.
- ✓ Individual requests must be submitted for **each** student annually.
- ✓ **Copy of birth certificate** (for first time registrants only) **and Proof of Residency (each year) are required.** Acceptable forms for proof of residency: utility bill, tax bill, signed lease, mortgage papers, etc. *Note: A driver's license is not acceptable as proof of residency.*
- ✓ Students must be five (5) years old prior to December 1, 2019.
- ✓ Residents who move into the District after the April 1 deadline have 30 days to submit this form.
- ✓ **New York State Education Law requires** that the district Transportation Office must **receive all transportation requests by April 1, 2019.** Late requests may not be processed.

All requests should be sent directly to the following address:

**Transportation Office**  
Nyack Public Schools  
13-A Dickinson Ave.; Nyack, New York 10960

Student Name \_\_\_\_\_  
(last name) (first name)

Address \_\_\_\_\_  
(number) (street) (city) (zip code)

Nearest intersection to your home \_\_\_\_\_

Student Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Name(s) of Parent or Guardian \_\_\_\_\_ Email \_\_\_\_\_

Primary Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Emergency contact name \_\_\_\_\_ Emerg. Phone \_\_\_\_\_

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Transportation will not begin prior to the first day of school for Nyack Public Schools

School to be attended \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

First day of school \_\_\_\_\_ Time school begins \_\_\_\_\_ Dismisses \_\_\_\_\_

School presently attending \_\_\_\_\_ Grade \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

- ***If transportation is to/from a different address please request an Alternate Site (Day care) Transportation Form by calling 845-353-7041 or on our website [www.nyackschools.org](http://www.nyackschools.org)***

Si ou bezwen enfòmasyon tradui an kreyòl, rele Jocelyne Abraham nan 353-7044.  
Si le hace falta información traducida en español, llama Yesenia Polanco al 353-7042.