



OYSTERPONDS U.F.S.D. IN ORIENT

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Richard C. Malone
Superintendent of Schools

2018-2019 NON-PUBLIC SCHOOL TRANSPORATION REQUEST

A transportation request form must be filled out each year that the child attends a non-public school. Please fill out an individual request for each child. All requests must be received at the above address no later than April 1 of the preceding school year.

To Whom It May Concern: In accordance with the laws of the State of New York, I hereby formally request transportation for:

Student Name:	Date of Birth:
Grade Level	Home Phone
Physical Address:	City, Town, Zip
Mailing Address:	
Mother's Name	Mother's Phone
Father's Name:	Father's Phone
Emergency Contact	Contact Phone:

Student will be transported to:

Name of Institution
Address:
Phone Number:
School Hours:

Transportation if being requested for the upcoming scholastic year on each day school is in session. The student is _____ years of age and will enter _____ Grade in September.

In addition, I hereby notify you that I have authorized the Principal of the above mentioned school to act as my representative under the provision of the Speno Law. This authorization is valid until revoked.

Signature of Parent/Guardian

Please Print

Date