

# RIVERHEAD CENTRAL SCHOOL DISTRICT

700 Osborne Avenue  
Riverhead, NY 11901-2996

## TRANSPORTATION REQUEST FORM

**\*STATE LAW REQUIRES APPLICATION BE FILED BEFORE APRIL 1, 2017\***

In accordance with the laws of the State of New York, I hereby formally request transportation for \_\_\_\_\_ to attend \_\_\_\_\_  
(Name of Student) (Name of School)  
\_\_\_\_\_ during the 2017 – 2018 School  
(Address of School)  
year on all days this school is in session.

This pupil is \_\_\_\_\_ years of age, born on \_\_\_\_\_ and will  
(Date of Birth)  
enter the \_\_\_\_\_ grade in September 2017.

### Please provide your personal and home information.

Mother's name/phone # - \_\_\_\_\_  
(Cell/Work Numbers)

Father's name/phone # - \_\_\_\_\_  
(Cell/Work Numbers)

\_\_\_\_\_  
(Home Phone Number and Address)

### Please provide emergency contact information. (not including yourself)

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Telephone #s \_\_\_\_\_ Telephone #s \_\_\_\_\_

Relationship: \_\_\_\_\_ Relationship: \_\_\_\_\_

\_\_\_\_\_  
Please Print Name (Parent / Guardian)

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

\_\_\_\_\_  
Date of Request

**BIRTH CERTIFICATE AND PROOF OF RESIDENCY IS REQUIRED WHEN ENTERING SCHOOL FOR THE FIRST TIME AND/OR CHILD IS NOT REGISTERED IN THE RIVERHEAD CENTRAL SCHOOL DISTRICT**

**PLEASE NOTE: IF THERE ARE ANY CHANGES YOU MUST CONTACT PUPIL PERSONNEL SERVICES @ 631-369-6706**