

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