

## **Elmont Union Free School District**

### CULTIVATING SCHOLARS AND GLOBAL CITIZENS

DR. KENNETH A. CARD, JR. Interim Superintendent of Schools

February 16, 2024

Dear Parents:

Your attention is called to the following important matter:

#### REQUEST FOR OUT-OF-DISTRICT TRANSPORTATION

Request for out-of-district private or parochial school transportation must be submitted **on or before April 1, 2024** for the school year beginning September 2024. Requests received after April 1, 2024 will not be considered except for new residents who are required to apply within 30 days after establishing residency in this District. Mail attached request and applicable proofs to: Transportation Department, Elmont Union Free School District, 135 Elmont Road, Elmont, New York 11003, or call 434-2032, 434-2033 or 434-2034.

Sincerely,

Dr. Kenneth A. Card, Jr.

Interim Superintendent of Schools

Attachment

#### ELMONT UNION FREE SCHOOL DISTRICT REQUEST FOR OUT-OF-DISTRICT TRANSPORTATION (2024-2025 SCHOOL YEAR)

New York State Education Law\* sets April 1, 2024 as the deadline for accepting requests for student transportation to private and parochial schools in the coming year. A request form must be completed for each child attending a non-public school and all forms are to be signed by a parent or guardian.

Under this Policy, transportation is provided to any non-public school student within fifteen (15) miles by the nearest route from the student's home. Kindergarteners through third grade students are transported if they reside more than one-half mile from school. Fourth grade through sixth grade students are transported if they reside more than one mile from school. In order to transport resident students, the child must be age 5 before December 31<sup>st</sup> of that school year.

Please provide the information requested on the form below. An early response will assist us in establishing transportation and schedule of services for your child.

We realize that sometimes the final acceptance to a school is not made until later in the year. If you plan or contemplate having your child attend a private or parochial school during the 2024-2025 school year then you must file a request for transportation by April 1, 2024. Please note: Transportation is not provided before our start date.

Please return this form to:

**Elmont Union Free School District** 

**Transportation Department** 

135 Elmont Road

Elmont, New York 11003

Kindly respond as soon as possible. <u>**DEADLINE: APRIL 1, 2024</u>** If you need additional forms, please contact the Transportation Office at 434-2032, 434-2033 or 434-2034.</u>

#### Please Print or Type

Child's Name:				
Address:				
Home Telephone:	Emergency Telephone:			
Grade as of 2024-2025: Date of	of Birth: Age:			
School your child will attend in September 2024:				
Did your child attend this school in 2023-2024?				
School Address:				
School Telephone:	School Hours:			
Parent or Guardian Name (Print):				
Signature of Parent or Guardian:	Date:			

\*FAILURE TO SUBMIT THIS TRANSPORTATION REQUEST FORM ON OR BEFORE APRIL 1, 2024 WITH REQUIRED DOCUMENTATION WILL RESULT IN YOUR CHILD NOT BEING ELIGIBLE FOR TRANSPORTATION FOR THE 2024-2025 SCHOOL YEAR.

# The following documentation must be presented with request for transportation and/or textbooks for all students attending non-public schools.

Student's Name:		Date of Birth:		
Student's Address:				
chool: Grade:			rade:	
School Address:				
Non-Public school students will not be provided transportation and/or textbooks unless three				
proofs of residency are submitted EVERY YEAR as requested below. This form with proofs must				
be submitted for each	1 student.			
You must submit one proof from each category.				
CATEGORY A	CATEGORY B	CATEGORY C	CATEGORY D	
		0111200111		
Photo Identification	Deed	Nassau County Tax Bill	Child's Original Birth Certificate	
NYS Driver's License w/current address	Lease	Mortgage Statement		
NYS Photo	Notarized Affidavits from	LIPA Bill		
Identification Card	Owner & Parent/Guardian (Available upon request)	Fuel Bill		
Non-driver's	(Available upon request)	Cable Bill		
dentification) w/current address		Bank Statement		
Wednest address		Credit Card Statement		
DDOOF OF	CITA DDI A NOTIO MUTEU	NE ADDITIONDY E TO AT OF	DEGLIDED	
PROOF OF GUARDIANSHIP WHERE APPLICABLE IS ALSO REQUIRED				
Parent/Guardian Name	e (Please Print):			
Home Telephone:		Work Telephone:		
Cell Phone:	*			
Parent/Guardian Signa	ture:	Date	e:	