

**HYDE PARK CENTRAL SCHOOL DISTRICT
TRANSPORTATION OFFICE
30 SMITH COURT
HYDE PARK, NY 12538
Phone (845)229-4070 Fax (845)229-4066**

REQUEST FOR TRANSPORTATION TO PRIVATE & PAROCHIAL SCHOOLS

PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURE

ONE CHILD'S NAME PER SHEET

FOR SCHOOL YEAR: _____

I am requesting transportation for my child:

CHILD'S NAME: _____

ADDRESS: _____

DATE OF BIRTH: _____ GRADE YOUR CHILD WILL BE ENTERING: _____

HOME PHONE NO.: _____ WORK NO.: _____

EMERGENCY NO.: _____ CONTACT PERSON: _____

PARENT'S NAME: _____

DIRECTIONS TO YOUR HOME (Nearest Street or Landmark): _____

APPROXIMATE MILEAGE FROM HOME TO SCHOOL: _____

TO: NAME OF SCHOOL: _____

ADDRESS: _____

PHONE NO. OF SCHOOL: _____

SCHOOL ATTENDED LAST YEAR: _____

PARENT'S SIGNATURE: _____

ALL REQUESTS MUST BE IN THE TRANSPORTATION OFFICE BY APRIL 1st OF THE PREVIOUS YEAR IF YOUR CHILD REQUIRES TRANSPORTATION TO AND FROM A DAYCARE LOCATION, PLEASE FILL OUT A DAYCARE REQUEST FORM. FORMS ARE AVAILABLE IN THE TRANSPORTATION OFFICE (845)229-4070 AND ON-LINE AT www.hydeparkschools.org