

Onteora Central School District Private School Transportation Requirements

In order for the Onteora Central School District to provide transportation to students enrolled in private schools, proof of residency in the district must be established and proof of age must be provided as per guidelines below.

PROOF OF RESIDENCY:

Homeowner

Please provide the following documentation:

- A copy of the deed or the most recent school tax bill, or
- A copy of a recent mortgage statement

and a copy of any two (2) required documents listed below.

If you just recently closed on a new home, please provide:

- The Settlement Statement from the closing or
- Certificate of Occupancy along with a homeowner's insurance policy

and a copy of any two (2) required documents listed below.

Renter

If you rent a house/apartment you must provide an "*Affidavit of Property Owner in Support of Admission to Onteora Central School District Form*" completed and signed by the owner and notarized along with a copy of the property owner's most recent school tax bill for the property you are renting.

You must also provide a copy of any two (2) required documents listed below.

NOTE:

- The name and address on these documents must match the name and address of the parent or legal guardian of the student being registered.
- The District will not accept a P.O. Box as a physical address. The physical address must appear on all documents.

Required Documents

Utility bills	Homeowners/Renters Ins. Policy
Current N.Y.S. Driver's License	Income Tax Return
Bank Statement	Auto Insurance Card or Policy
Moving Company Receipt	Documents issued by federal, state or local agencies

PROOF OF AGE

A certified transcript of a birth certificate or record of baptism (including a certified transcript of a foreign birth certificate or record of baptism) or, if neither is available, a passport (including foreign passport), will suffice to determine a child's age.

The following are examples of other documentary evidence (which must have been in existence for at least two years) that may be considered to establish a student's age if a certified transcript of a birth certificate or record of baptism (domestic or foreign), or passport (domestic or foreign), is unavailable. This list is not intended to be exhaustive, nor is it a list of required documentation:

- Consulate identification card

- Court order or other court-issued documents
- Documents issued by the federal, state or local agencies (e.g. local social service agency, federal Office of Refugee Resettlement)
- Hospital or health records
- Military dependent identification card
- Native American tribal document
- Official driver's license
- Records from non-profit international aid agencies and voluntary agencies
- School photo ID with date of birth
- State of or other government issued documentation

TRANSPORTATION DEPARTMENT
ONTEORA CENTRAL SCHOOL DISTRICT
PO BOX 300
4166 ROUTE 28
BOICEVILLE, NY 12412
(845) 657-2537
FAX (845) 657-7079

PRIVATE & PAROCHIAL SCHOOL TRANSPORTATION APPLICATION

In accordance with the Laws of the State of New York, I hereby formally request transportation for my child who will attend the _____ school in the _____ school year.

Student Name: _____ DOB: ____/____/____ Entering Grade: ____
(Last) (First)

Student Home Address: _____
(House #) (Street) (Town) (Zip)

Home Phone: _____ Other Emergency Phone: _____

School attended by your child in the previous school year _____

Please remember that the Onteora Central School District does not transport to Private & Parochial Schools on days when our District is closed for students.

A request must be completed for each student and submitted on or before April 1 as determined by Education Law Section 3635. To be eligible for service, all students must be registered with the Onteora Central School District and must meet the same requirements as students attending the Onteora Central School District.

Parent / Guardian Signature: _____ Date: ____/____/____

School Official Signature: _____ Date: ____/____/____

----- Below for District use only -----

Date form received in Transportation: _____ Received by: _____

Is the student registered in the District? Yes _____ No _____

Transportation approved? Yes _____ No _____

Onteora Central School District – Registration Form

Confidential

Student #: _____

Student Information

Legal Name: <small>(as it appears on Birth Certificate)</small>	Nickname:
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Student Resides with: ___ Both Parents at same address ___ Both Parents at separate addresses ___ Parent A Only ___ Parent B Only ___ Legal Guardian ___ Foster Parent(s)

Custody of Student: <small>(if not residing with both parents)</small> ___ Court appointed Sole Custody is with Parent/Guardian A listed below ___ Joint Legal Custody/Primary Physical Custody is with Parent/Guardian A listed below ___ Joint Legal Custody/Joint Physical Custody (Please note Primary Residence will be used for Transportation) ___ Informal, no court orders in effect
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Custody Papers (if applicable): Yes / No Date of Birth: _____ Gender: Male / Female	Is the student Hispanic/Latino or of Spanish origin? YES / NO Race (check at least one, you may check all that apply): ___ American Indian or Alaskan Native ___ Asian ___ Black or African American ___ Native Hawaiian or Other Pacific Islander ___ White (Caucasian)
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If student was born in the US or its territories: Birth City: _____ Birth State/Territory: _____ <small>US Territories include: American Samoa, Guam, Northern Marianna Islands, Puerto Rico, US Minor Outlying Islands, US Virgin Islands</small>
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Parent/Guardian A (Student's Primary Residence)

Full Name Physical Address City/State/Zip Mailing Address (if different) City/State/Zip Home Phone Work Phone Cell Phone	Parent/Guardian A's relationship to student (check one): ___ Mother ___ Father ___ Foster Mother ___ Foster Father ___ Grandmother ___ Grandfather ___ Court Appointed Legal Guardian ___ Other _____ Student resides with this parent? Full time / Part time
Email	

Step Parent at this Address (if applicable)

Full Name	Work Phone Cell Phone
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Parent/Guardian B

Full Name Physical Address (if different) City/State/Zip Mailing Address (if different) City/State/Zip Home Phone Work Phone Cell Phone	Parent/Guardian B's relationship to student (check one): ___ Mother ___ Father ___ Foster Mother ___ Foster Father ___ Grandmother ___ Grandfather ___ Court Appointed Legal Guardian ___ Other _____ Same residence as Parent/Guardian A? Yes / No If No, Student resides with this parent? Part time / No
Email	

Step Parent at this Address (if applicable)

Full Name	Work Phone Cell Phone
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Student's Educational Background
(Please list **ALL** previous schools, use separate sheet if necessary)

Previous School	Previous School's Address	Grades Attended	Dates of Attendance

Has your child been retained (repeated a grade)? Yes / No If yes, what grade(s)? _____
 Is your child currently receiving English as a New Language (ENL) services? Yes / No
 Has your child previously received ENL services? Yes / No If yes, when did services end? _____
 Has your child ever attended a school in the Onteora District? Yes / No If yes, when? _____
 If applicable, when did your child enter 9th grade? _____

Special Education Services Information

Does your child currently have an IEP? Yes / No	Is your child currently receiving:
Does your child currently have a 504 Plan? Yes / No	Counseling Yes / No
District with current approved plan	Remedial Math Yes / No
Name of contact person	Remedial Reading Yes / No
Comments:	Speech Yes / No
	Other

Siblings / Other Children Living at Primary Address

Name (Include last name if different)	Gender	Birth Date	Grade	Present School	Relationship to Student

Other Adults Living at Primary Address

Name (Include last name if different)	Gender	Relationship to Student

Student's Previous Address if New to the Onteora Central School District

Street	City/ State/ Zip
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It is the policy of the District that the student will be initially enrolled and begin attending school the next school day, or as soon as practicable, pending a final determination by the District that the student is a resident of the District and is entitled to attend the schools of the District on a tuition free basis. Please be advised that, in the event that a family violates the residency requirement, the Onteora Central School District has the right to bill for back tuition for the period of time that the student(s) attended District schools as non-residents.

I certify that I am a resident of the Onteora Central School District and all information provided above is accurate to the best of my knowledge.

Signature _____

Date _____

**AFFIDAVIT OF PROPERTY OWNER
IN SUPPORT OF RESIDENCY IN THE
ONTEORA CENTRAL SCHOOL DISTRICT**

STATE OF NEW YORK)
) SS.:
COUNTY OF ULSTER)

I, _____, a property owner of the dwelling located at
(Name of Property Owner)

(Street Address/Apt #)

(City,State,Zip)

hereby certify that I am renting space in this dwelling on a _____ basis beginning on _____
(Weekly/Monthly/Yearly) (Date)

The following persons are identified as tenants having the right to be occupants in the dwelling:

- Parent/Guardian: _____
- Parent/Guardian: _____

Name(s) of Child(ren):

	Last Name	First Name	MI		Last Name	First Name	MI
1				4			
2				5			
3				6			

List all persons residing in this dwelling:

	Last Name	First Name	MI		Last Name	First Name	MI
1				4			
2				5			
3				6			

The payment of Electric Utility Bill is included in rent: Yes: ____ No: ____

I certify that the information provided on this form is true and correct and that the statements made herein are being made under the penalties of perjury, knowing that the Onteora Central School District will rely upon them in determining whether the above-named child(ren) reside in the school district.

(Signature of Property Owner)

(Print Name)

Making a false statement regarding living arrangements is a violation of the law, to wit: a violation of section 210.35 and 210.45 of the NY Penal Law, which are Class A misdemeanors and may be punishable by up to a fine of up to \$1,000 and/or up to one year of imprisonment.

Sworn to before me this _____ Day
_____ 20_____

(Notary Public)

Notary
Stamp