(B6T) Nonpublic School Transportation Application (N.J.A.C 6A:27-2.5)

Instructions

It is the obligation of the parent or guardian of nonpublic school students to annually obtain the Nonpublic School Transportation Application from the administrative office of the nonpublic school for each student for which transportation services are being requested. Submit a separate application for each student.

Note:

- If there is a change of home address, a new application shall be submitted to the public school district
 of residence.
- If there is a change in the nonpublic school of attendance, a new application shall be submitted to the
 public school district of residence.
- Complete this application and return it to the nonpublic school on or before March 10th preceding the school year in which transportation is being requested.
- Late applications Any application received after March 10th will be a late application and must be
 accompanied by a statement of the reason for lateness. Eligible students will receive transportation or
 aid in lieu of transportation based on the date the application is received by the public school.
- It is the obligation of the nonpublic school administrator to annually collect the application and submit it to the public school district from which transportation is being requested prior to March 15th.
- It is the obligation of the public school administrator to notify the parent or guardian as the determination of each application by August 1st.
- A district board of education shall pay aid in lieu of transportation to the parent or guardian of an eligible student only after receiving a signed "Nonpublic School Transportation Payment" voucher (B7T) as prescribed by the Commissioner of Education.

Nonpublic School Transportation Application Form				
School Year: 2023-2024 Resident District Board of Education:				
Student Name:				
Last		First	Middle	
Date of Birth (mm/dd/yy):	Parent	t/Guardian Name:		
Daytime Phone:	Email Address:			
Area cod	e + number			
Home Address:		City:	Zip:	
Mailing Address:		City:	Zip:	
Full name of school to be a	attended: DePaul Catho	lic High School		
Phone: (973) 694-3702	Address of School: 1512 Alps Road, Wayne, NJ 07470			
Area code + numbe	ər			
Student's grade for the cor	ming year:			
Shortest one-way mileage	hetween home and scho	ol:		
Official official may minosige		(shortest route along pub	olic roadways or	
	walkways to the nearest tenth of a mile)			
Date school opens (mm/dd/yy): 09/05/20		Date school closes (mm/dd/yy): 06/18/20		
School hours: 8:00 am	AM to 2:10 pm PM	ı		
Name of school of attenda	ınce in prior year:			
Address:				
Signature:		Date (mm/dd/yy):		
Public School Use Only	(Do <i>not</i> write below this	s line)		
	reviewed by the residen	t district board of education.	The following determination has	
been made: Transportation will be	•	re eligible for payment in lie rsportation	u 🔲 Ineligible	
Reason:				
Title:				
Signature:	ignature:		Date (mm/dd/yy):	