

# NOTRE DAME OF BETHLEHEM SCHOOL

Dear Parents,

According to Pennsylvania Law, nonpublic school children are entitled to transportation to nonpublic schools as follows:

1. A district, which provides transportation for resident public school students, must also make identical provisions for the transportation of resident nonpublic school students according to the nonpublic school calendar.
2. Transportation for nonpublic school students must be provided to and from the nonpublic school in which the student is enrolled, even if the nonpublic school is located outside the district so long as the distance is not more than 10 miles beyond the district boundaries. (NOTE: This distance may be in excess of 10 miles from a student's home.)
3. A district may transport children who live along hazardous routes even though the children live within walking distance of the school.

If you think you are eligible for transportation and desire it for the next school year, please complete the request form below and return it to school immediately. Thank you!

School Term \_\_\_\_\_

**PLEASE RETURN FORM ASAP.**

## **Request for Transportation under Act 372**

(Please complete a separate form for each child needing bus transportation for the next school year and return it to school.)

1. Child's name: \_\_\_\_\_ Grade entering next school yr.: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_
2. Address \_\_\_\_\_  
(If rural address, indicate specific location)  
\_\_\_\_\_
3. Name of Catholic school to be attending in August 20\_\_ \_\_\_\_\_
4. Name of Public School District in which child resides \_\_\_\_\_
5. The above named child lives approximately \_\_\_\_\_ miles from the Catholic school to be attended next August.
6. If the child received public school district transportation last year, please indicate bus number \_\_\_\_\_  
and District \_\_\_\_\_.

	Mother Information	Father Information
Name (please print):	_____	_____
Home phone:	_____	_____
Work phone:	_____	_____
Cell phone:	_____	_____

Date \_\_\_\_\_ Parent signature: \_\_\_\_\_

Emergency Contact Names & Phone Numbers (other than parents):

Name: _____	Phone: _____	Cell: _____
Name: _____	Phone: _____	Cell: _____
Name: _____	Phone: _____	Cell: _____