



# Sweet Home Central School District of Amherst and Tonawanda

Transportation Office  
1741 Sweet Home Road • Amherst, New York 14228  
(716) 250-1435 Fax (716) 250-1439  
businfo@sweethomeschools.org

## Transportation Request for Charter/Private/Parochial Schools

Dear Parents:

In accordance with the New York State Education Law #3625, only parents or guardians residing in this school district desiring to have their child transported to a charter, private or parochial school outside the district boundaries and including St. Christopher's School, must submit a written request for such transportation by April 1, preceding the next school year. A new form must be filed every year.

New residents or those who move within the district must submit a written request within thirty days after establishing their residence along with proof residency. Forms and residency proof must be submitted to Central Registration at 1901 Sweet Home Rd, Door #6 for new residents or those who have moved within the school district only.

Normal transportation processing is one to two weeks. As per Sweet Home School District policy, the school needs to be exactly 15 measured miles or less from the student's residence. The mile measurement is based on the shortest possible route using normally travelled public roads from the student's place of residence to the attending school (not to be measured in a radius method).

Please complete the form below for EACH INDIVIDUAL CHILD requiring transportation.

Thank you.

Scott Kennedy  
Transportation Supervisor

Date: \_\_\_\_\_

SCHOOL YEAR TRANSPORTATION IS BEING REQUESTED FOR (EG. 23/24, 24/25) \_\_\_\_\_

NAME OF STUDENT: \_\_\_\_\_ MALE \_\_\_ FEMALE \_\_\_

ADDRESS OF STUDENT: \_\_\_\_\_ ZIP CODE \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ PARENT/GUARDIAN NAME: \_\_\_\_\_

HOME PHONE# \_\_\_\_\_ ALT. PHONE# \_\_\_\_\_ EMAIL \_\_\_\_\_

SCHOOL ATTENDING: \_\_\_\_\_ GRADE IN SEPTEMBER: \_\_\_\_\_

DOES YOUR CHILD HAVE ANY MEDICAL CONDITIONS OR CONCERNS THAT AS TRANSPORTERS WE WOULD NEED TO BE AWARE OF? YES \_\_\_ NO \_\_\_

IF YOU ANSWERED YES, PLEASE DO NOT INDICATE THE CONDITION OR SITUATION ON THIS FORM. AFTER COMPLETING AND SUBMITTING THE FORM, PLEASE CONTACT THE TRANSPORTATION SUPERVISOR AT 250-1438 TO SET UP A CONFIDENTIAL DISCUSSION REGARDING THE SITUATION.

TRANSPORTATION NEEDED: (CHECK ONE) AM \_\_\_ PM \_\_\_ BOTH \_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

DATE RESIDENCY ESTABLISHED IN SCHOOL DISTRICT: \_\_\_\_\_

IF THIS IS A LATE REQUEST, PLEASE STATE REASON: \_\_\_\_\_

\_\_\_\_\_



Sweet Home Central School District  
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Central Registration  
1901 Sweet Home Road • Amherst, New York 14228  
P: (716) 250-1600 F: (716) 250-1378  
Email: registration@sweethomeschools.org

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Dear Parent/Guardian,

Although your student does not attend a Sweet Home School, Sweet Home CSD is billed for some educational resources.

Therefore, it is the policy of the Sweet Home School District to require proof of residency when a student lives in our district but attends either a private or charter school.

Please fill out the form below and attach proof of residency in the Sweet Home school district. A lease, mortgage or current utility bill will be accepted.

Date\_\_\_\_\_

Name of student:\_\_\_\_\_

Address of student: \_\_\_\_\_

Grade:\_\_\_\_\_

Parent/guardian names:\_\_\_\_\_

Home # \_\_\_\_\_ Cell # \_\_\_\_\_

School Attending \_\_\_\_\_

Does your child have a current IEP? yes \_\_\_\_\_ no \_\_\_\_\_

Date of Enrollment \_\_\_\_\_

Parent/guardian signature \_\_\_\_\_

*Feel free to contact our Central Registration office with any questions or concerns*

*Thank you  
Central Registration*

*Sweet Home Schools....Every Student, One Community, Ready for the Future*