

Suffern Central School District

Transportation Office

45 Mountain Avenue Hillburn, NY 10931

NY State Deadline:

April 1, 2025

Date _____

SY 2025-2026

transportation@sufferncentral.org 845-357-7783 x11286 fax 845-357-3073

REQUEST FOR TRANSPORTATION TO PRIVATE/PAROCHIAL SCHOOL

TRANSPORTATION REQUEST DEADLINE: Parents who desire transportation to private/parochial school next year, 2025 – 26 must submit this form by April 1, 2025

In accordance with the laws of school during the coming sch	•	quest transportation for my child to a private	;
Child's Last Name		First Name	_
Date of Birth	_Age Gender: Male Female	Home Phone #	_
Home Address			_
	(Number and Street)	(City) (Zip Code)	-
Mother's Name	Cell #	Email	_
Father's Name	Cell#	Email	_
Emergency Contact	Phone #	Relationship	_
Private School To Be Attended		_School's Phone #	_
Private School Address			_
Grade Child Will Be Entering	First Day of Sc	chool	
Does the child currently ride a S	uffern CSD bus: Yes No		
agree that I will be legally bound, o		the legal parent/guardian of student identified above. FOR TRANSPORTATION TO PRIVATE/PAROCHIA gnature.	
Signature(Parent/G		ed Name	_

Please note:

- 1. An individual request must be submitted for **each** child each year transportation is desired. All information requested must be included.
- Children not 5 years of age by December 1 are not entitled to transportation during that school year.
- 3. This form must be received in the Transportation Office of the Suffern Central School District by April 1, or transportation privileges may be jeopardized for the entire school year.
- 4. New residents must submit their request(s) within 30 days of moving into the district, provide proof of residency and a copy of the child's original birth certificate.
- 5. New enrollees (including siblings or Kindergarteners) requests must include a copy of child's birth certificate.
- 6. If a Request for Private School Transportation is rejected before April 1, any second request must be submitted by April 1.