

SHELTER ISLAND UNION FREE SCHOOL DISTRICT
PRIVATE SCHOOL TRANSPORTATION/TEXTBOOK
REGISTRATION CHECKLIST

Step 1: Central Registration at The Shelter Island School

- Completed Registration Packet

- Photo Identification of Parent and/or Guardian – *need one*
 - NYS Driver's License
 - NYS Identification Card
 - Military Identification
 - Resident Alien Card
 - Passport
- Proof of Residence (physical address)
 - Home Owner – *need two*
 - Deed, current mortgage statement or tax bill
 - Current utility bill (cable, PSEG, fuel)
 - Photo Identification (driver's license, military ID, passport)
 - Current checking, savings or major credit card account statement

**Note: Telephone Bills, Library Cards and P.O. Boxes are not acceptable*
 - Renter – *need two*
 - Rental Registration Affidavit
 - Notarized Lease (original)
 - Current utility bill (cable, PSEG, fuel)
 - Photo Identification (drivers license, military ID, passport)

**Note: Telephone Bills, Library Cards and P.O. Boxes are not acceptable*
- Student Documentation
 - Birth Certificate/Passport

Step 2: Transportation Form

- Submit transportation form (Ross School, Hayground, OLOTH, or Peconic Community School)
 - Grades Kindergarten through Twelve Only
 - Parents' responsibility to renew transportation with the Shelter Island School District each year before April 1st deadline. Obtain form from student's registered school

Step 3: EASTERN SUFFOLK BOCES Text Book Registration Online

- Information from the student's registered school (Ross School, Hayground, OLOTH, or Peconic Community School)

Please submit all forms and required documentation to:

Donna B. Clark
Central Registration
Shelter Island School District
P.O. Box 2015
Shelter Island, New York

donna.clark@shelterisland.k12.ny.us

P. 631-749-0302, ext. 111

F. 631-749-1262

Shelter Island UFSD Private School Records Registration Data

Today's Date: _____

PLEASE PRINT

Elementary School

Secondary School

Entry Grade Level: _____

School Attending: _____

Student's Name _____
Last First Middle

(as it appears of Birth Certificate)

Gender Male Female **Date of Birth** _____
MM DD YYYY

Proof of Birth for Student Birth Certificate Passport

Special programs in school Special Education 504 Other _____

Present Physical Address of Student _____
Number Street Address

City/Town State Zip Code

Mailing Address of Student _____
P.O. Box Number Center/Height

Legal Parent (1) _____
Last First

Home Telephone _____ Cell Phone _____

Mailing Address _____

Email Address _____

Legal Parent (2) _____
Last First

Home Telephone _____ Cell Phone _____

Email Address _____

Print Name of Parent/Guardian

Signature of Parent/Guardian

Date

**THIS AFFIDAVIT IS REQUIRED IF YOU ARE RENTING.
THIS FORM MUST BE COMPLETED BY THE OWNER OF THE RESIDENCE.
A COPY OF A TAX BILL OR DEED MUST ACCOMPANY THIS FORM**

SHELTER ISLAND UNION FREE SCHOOL DISTRICT

Central Registration: Donna B Clark
P.O. Box 2015/33 North Ferry Road
Shelter Island, New York 11964-2015
631-749-0302 / FAX 631-749-1262

RENTAL REGISTRATION AFFIDAVIT

STATE OF NEW YORK
COUNTY OF SUFFOLK

I, _____, residing at _____,
_____(telephone number), am the owner of the residence located at _____, which is within the boundaries of the Shelter Island Union Free School District, and will have the following person (s) residing in said residence for a period of _____ years, beginning ___/___/___ and ending ___/___/___:

I understand that it is my responsibility to inform the District if/when the conditions set forth above terminate or change. In the event the Shelter Island Union Free School District determines that the above person(s) do not reside at this address or have moved and remained registered these students will be dropped from the attendance register of the Shelter Island Union Free School District. I also understand that as the homeowner, I may be liable for tuition and/or transportation costs for each student listed above that received services from or attended the Shelter Island Union Free School District.

.....
You as deponent understands that this affidavit is made under oath; that the statements are true; that the Shelter Island Union Free School District Board of Education will rely thereon, and that any misstatements made could result in criminal (perjury) charges being brought against the person whose signature appears hereon.

Signature of Deponent

Taken and sworn to before me this
____ day of _____, 20____
