



**Annual Request for Transportation to a Private, Charter or Non-Public School, the Act 372**

School Year 2025-2026

School Attending: \_\_\_\_\_ (Separate form for each school)

This form is the annual request for transportation to a private, charter or non-public school under Act 372.

**The Methacton School District requires two proof of residence along with this document (examples are real estate tax bill, Pennsylvania Driver’s License, Lease, Utility or Cable Bill), all showing the address of residency.**

This form is to be submitted each year by July 15<sup>st</sup> or transportation cannot be guaranteed for the start of your child’s school.

Name of Child: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ School: \_\_\_\_\_

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Name of Child: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ School: \_\_\_\_\_

(Please check one of the box)

Student only needs transportation in the AM only PM only AM & PM Only Rides Occasionally

**Joint/Shared Custody Situation:** The district permits transportation to both parents living in separate household within the school district. **Proof of residency must be submitted for both parents.** Transportation is **NOT** provided to any parent living outside of the school district.

Name of Parent or Guardian: \_\_\_\_\_

Street Address: \_\_\_\_\_, City: \_\_\_\_\_, Zip: \_\_\_\_\_

Emergency Contact #; (\_\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

Street Address: \_\_\_\_\_, City: \_\_\_\_\_, Zip: \_\_\_\_\_

Emergency Contact #; (\_\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

Please send the completed form along with the proof of residency via email to Router12675@firstgroup.com or by mail to Transportation at Methacton, 1001 Kriebel Mill Rd., Eagleville, PA 19403.