

Nonpublic Transportation Affidavit Form

Transportation Department

Due by APRIL 1ST

New App ☐ Renewal App ☐ Address Change ☐ School Change ☐

Student Information:

Male ☐

ERCSD Student ID # _____ Female ☐ Birth Date _____ Grade _____

Student Birth Name: First _____ Middle _____ Last _____

Student Address _____ City _____ State **NY** Zip _____

For Address Change: (Previous Address) _____

Parent/Guardian Information:

Parent/Guardian 1: First _____ Last _____

Relationship: _____ Email Address _____ Phone# _____

Parent/Guardian 2: First _____ Last _____

Relationship: _____ Email Address _____ Phone# _____

Emergency Contact Information:

Contact 1: First _____ Last _____

Phone # _____ Relationship: _____

Contact 2: First _____ Last _____

Phone # _____ Relationship: _____

I agree to abide by all the rules of my school to apply on my behalf for transportation, textbooks, and any other services available to my child from the East Ramapo Central School District. I agree to be contacted via phone, text message, and email for announcements and any additional information whenever needed including auto-dialed or pre-recorded messages, by any number associated with my opt-in.

Parent/Guardian Signature: _____ Print Name: _____ Date: _____

NYSED TRANSPORTATION LAW: https://www.p12.nysed.gov/schoolbus/Parents/htm/late_requests.htm

As a unified community, the East Ramapo Central School District is committed to educating the whole child by providing a healthy, safe, supportive, engaging and challenging learning environment.