February 2017

Dear Parent or Guardian:

Enclosed you will find the application for the Non-Public Schools Transportation Request for the 2017-2018 School Year.

As you can see by the enclosed form, the deadline for completion and return to this office is **April 1, 2017**, in accordance with NYS Education Law. Please complete the enclosed form (back side of letter) and return it to the address listed on the form to ensure your child will have transportation to their school for the 2017-2018 school year.

If you would like a copy of Liverpool’s School Calendar for the next school year to find Liverpool’s day’s off, one can be obtained by going to the district’s web site at: [www.liverpool.k12.ny.us](http://www.liverpool.k12.ny.us). If you need additional copies of the application, you can print one from the website under the transportation’s forms section.

Feel free to contact Dispatch should you have any questions regarding out of district transportation.

Sincerely,

Laura D’Arcangelis

Laura D’Arcangelis
Director of Transportation

Enclosure – Back Side
Date Received: ____________________ LIVERPOOL CENTRAL SCHOOL DISTRICT
Telephone (315) 453-0287

Non Public School Attending __________________________ Student ID ______________________
(Office Use Only)

NON PUBLIC SCHOOL TRANSPORTATION REQUEST

In accordance with the Laws of the State of New York, transportation is requested for the student described below to and from the non public school named on each day that Liverpool Schools are in session during the 2017-2018 school year. This authorization is to remain in effect while the student is enrolled at said school for the above school year or until otherwise revoked by me in writing.

Please print. Use a separate form for each student for whom transportation is requested.

Name of student __________________________
Address _______________________________________________________
____________________________________________________
____________________________________________________
Home Phone # __________ Business Phone # __________ (Mom)
Cell Phone # __________ Business Phone # __________ (Dad)
Grade __________ Date of Birth ________ Male _____ Female _____

Please check below the appropriate transportation requested:

A.M. Pick Up Only _______ P.M. Drop Off Only _______ Both A.M/P.M _______

Baby-sitter, Day Care situations: Where a child is to be transported to and/or from a baby-sitter, daycare center or any address other than the home, complete the following. The baby-sitter/daycare location must be within the Liverpool Central School District. The school district will transport only to and from a baby-sitter/daycare location that is in the same school attendance area as the child's home.

Baby-sitter/Daycare Name ______________________________
Address _________________________________________________
Telephone ________________________________________________

Parent/Guardian Signature (PLEASE PRINT) __________________________ Date

Parent/Guardian Signature (PLEASE SIGN) _________________________ Date

FILING DEADLINE – APRIL 1, 2017. This form needs to be mailed to:
Liverpool Central School District
4101 Long Branch Road
Liverpool, NY 13090
Attn: Deana Mahar

“No later” than April 1, 2017. If the request is filed later than April 1, 2017, a reason for filing must be given.

________________________________________________________

PLEASE BE ADVISED – LIVERPOOL CENTRAL SCHOOL DISTRICT WILL NOT TRANSPORT STUDENTS WHEN LIVERPOOL SCHOOL DISTRICT IS CLOSED