

PRIVATE / PAROCHIAL SCHOOL TRANSPORTATION REQUEST FORM

Elwood Public Schools
Transportation Department
100 Kenneth Ave
Greenlawn, NY 11740-2900
Phone: 631-266-5400 x 5435 – Fax: 631-266-1576
transportation@elwood.k12.ny.us

(Due by April 1st every year – form may be mailed, faxed or emailed)

I hereby formally request Transportation for my child for the **2024-2025** school year to:

(School)

(School Address)

(School last attended)

STUDENT INFORMATION
(Please use one form for each student)

If you are new to the district or registering a Kindergarten student, you must prove residency prior to requesting transportation. Please contact Registration at 631-266-5400 x 1455.

Name: _____

Address: _____

Grade (as of 9/2024): _____ Birthdate: _____

Home Phone # _____

Cell #: _____ Work #: _____

Emergency #: _____

Parent/Guardian: _____

Parent/Guardian Signature: _____

Parent/Guardian Email Address:

Date: _____