



*THE GOAL OF THE FARMINGDALE PUBLIC SCHOOLS IS TO ESTABLISH OURSELVES AS A HIGH ACHIEVING SCHOOL DISTRICT AS EVIDENCED BY HIGH LEVELS OF STUDENT PERFORMANCE IN ALL AREAS INCLUDING NEW YORK STATE ASSESSMENTS AND REGENTS EXAMS*

---

**FARMINGDALE UNION FREE SCHOOL DISTRICT  
FARMINGDALE, NEW YORK**

---

JOHN LORENTZ  
*Superintendent of Schools*

(516) 752-6555  
FAX (516) 752-3025

BARBARA J. HORSLEY  
*Assistant Superintendent*

JOSEPH G. WILLIAMS  
Transportation

January, 2011

Dear Principal:

For our 2011/2012 transportation-planning purposes, it is important that all students who are applying for acceptance to your school for the first time (2011/2012 school year) ***and*** those students who will be returning to your school, be aware that they must request transportation. (A supply of Request for Special Transportation forms for our District is enclosed. Please feel free to copy them if you need more. If your school publishes a newsletter, we would request that you include information regarding Special Transportation forms.

**Transportation will not begin until the official start date of the Farmingdale Public Schools.**

**State Ed.** requires all such requests be in the hands of the Districts **on or before April 1**, regardless of whether the student has been accepted by that date.

Thank you.

Very truly yours,

*Joe Williams*

Joe Williams  
Bus Dispatcher

2011/2012 School Year  
**ALL PRIVATE/PAROCHIAL SCHOOL STUDENTS**  
**MUST FILE THIS FORM WITH THE DISTRICT TRANSPORTATION**  
**OFFICE BY APRIL 1st**

FARMINGDALE PUBLIC SCHOOLS  
Transportation Office  
50 Van Cott Avenue Farmingdale, NY 11735  
Phone - (516) 752-6555 Fax - (516) 752-3025

TRANSPORTATION WILL NOT BEGIN UNTIL THE OFFICIAL START DATE OF THE FARMINGDALE PUBLIC SCHOOLS

**Request for Special Transportation (Please Print Clearly)**

For: Student's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ (Street) \_\_\_\_\_ (Town)

Parent's Name \_\_\_\_\_ Telephone # \_\_\_\_\_

Please supply us with the nearest cross street \_\_\_\_\_

EMERGENCY INFORMATION (if parent cannot be reached)

Contact Person/Relationship \_\_\_\_\_ Phone \_\_\_\_\_

I request transportation for my child, named above, to the following school:

School's name \_\_\_\_\_

Address \_\_\_\_\_ (Street/Town) \_\_\_\_\_

Grade in which child is to be enrolled \_\_\_\_\_

School Now Attending \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE NOTE THE FOLLOWING:**

1. **THIS FORM MUST BE FILED WITH THE DISTRICT TRANSPORTATION OFFICE BY APRIL 1st. *One form must be completed for EACH child*** for whom transportation is requested and returned to the Transportation Director's Office 50 Van Cott Ave., Farmingdale, NY 11735.
2. To be eligible for transportation to a private or parochial school, the child must be eligible for entrance into the Farmingdale Public Schools and must not live more than 15 miles from the school of attendance. **PROOF OF RESIDENCY IS REQUIRED ONLY IF YOU DID NOT PROVE RESIDENCY WHEN YOU ORIGINALLY ENROLLED.**
3. In the interest of the safety of all our students, transportation will ***NOT*** be provided to any non-public or BOCES school when the Superintendent of Schools has closed the Farmingdale Public Schools due to weather or road conditions.

Y:\BusRelatedFiles\Transportation\PrivateParochialTransp Form & Letter.doc