

CHEEKTOWAGA-SLOAN UFSD

166 Halstead Avenue / Phone# (716)-891-6404

Private, Parochial, and Charter School Transportation Request Form School Year 2024-2025

New York State Education Law provides for the transportation of all students, within established limits, including those attending non-public schools. The Cheektowaga-Sloan Union Free School District surpasses minimum state walking distance mandates to help safeguard our students. Students are expected to walk a moderate distance to and from a corner bus stop. Therefore, a house stop should not be expected. services. Funds for transportation services are appropriated as part of the school district budget.

- To comply with State Education Law, you must submit this request form for transportation services, along with three (3) current proofs of residency
- **Due Date:** April 1, 2024 *(The filing of a late request may result in denial of transportation services. Please retain confirmation of a fax or email.)*
- A separate form is required for each student requesting transportation.
- Requests must be renewed each school year the student will require bus service.
- **All students** requesting transportation to a private, parochial or charter school must be formally registered with the Cheektowaga-Sloan Union Free School District. If you switch to a different school, you will need to re-register here. Details can be found at the following website: <https://www.cheektowagasloan.org/Page/1511>

----- How to Submit This Form -----		
Mail	Fax	Email
Cheektowaga-Sloan UFSD Transportation Office 166 Halstead Avenue Sloan, NY 14212	(716) 891-6435	choran@cheektowagasloan.org

Student Name:	
Date of Birth:	
Address:	
City:	
Zip Code:	
Phone Number:	
School Attending (September 2024):	
Grade Entering (September 2024):	
School Address:	
School Zip Code:	
School Phone Number:	
School Fax Number:	

Please Complete BOTH Sides

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Parent Information			
Parent	Custodial Parent	Resides in Household	Phone Numbers
Mother's Name:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Main #: Alt. #:
Father's Name:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Main #: Alt. #:
Emergency Contacts			
Name	Relationship	Phone Number	
Three Required Proofs of Residency: Please include copies of the selected documents when submitting			
List A (Select 1)		List B (Select 2)	
<input type="checkbox"/> Homeowner's Agreement <input type="checkbox"/> Homeowners Insurance <input type="checkbox"/> House Deed <input type="checkbox"/> Housing Document <input type="checkbox"/> Lease Agreement <input type="checkbox"/> Mortgage Statement <input type="checkbox"/> Notarized Landlord Affidavit <input type="checkbox"/> Real Estate Statement <input type="checkbox"/> Renters Insurance		<input type="checkbox"/> Bank Statement <input type="checkbox"/> Car Insurance <input type="checkbox"/> Car Registration <input type="checkbox"/> Cell Phone Bill <input type="checkbox"/> Court or Agency Document <input type="checkbox"/> Government Benefit Document <input type="checkbox"/> Health Records <input type="checkbox"/> Non-Utility Bill <input type="checkbox"/> Payroll Statement <input type="checkbox"/> Property Tax Bill <input type="checkbox"/> Sale Contract <input type="checkbox"/> School Tax Bill <input type="checkbox"/> Utility Bill	

I hereby certify that I am a resident of the Cheektowaga-Sloan Union Free School District, I am the legal parent or guardian of the above-named student, and I am requesting transportation for the 2024-2025 school year (9/2024 – 6/2025). I understand that this request is for the District's regularly scheduled school days only. Transportation will not be provided on days when the Cheektowaga-Sloan Union Free School District is closed.

Parent/Guardian Signature Required

Date

Please Complete BOTH Sides