



WEST SENECA CENTRAL SCHOOL DISTRICT

Transportation Department • 3300 Seneca Street • West Seneca, New York 14224-2746
Telephone: 716/677-3820 • Facsimile: 716/677-3826

NON-PUBLIC TRANSPORTATION SERVICE REQUEST

The following requirements must be met **prior** to receiving transportation.

1. A separate application must be completed for each student requesting transportation.
2. If the child is to attend a Kindergarten or a Transitional program, a copy of the child's birth certificate must accompany the application.
3. The district requires proof of residency that **must** accompany all requests. A photo identification of the parent/guardian with his/her current address may be acceptable if the child's school or address has not changed. **Two** proofs of residency, a photo identification of the parent/guardian with his/her current address **and** one document from **Section B** is required (see reverse side), when **one** of the following is true:
 - A). The student is enrolling at the school for the first time.
 - B). The student's address has changed from the previous year.
 - C). The school to which transportation is being requested has changed.
4. This form is to be completed and returned **No Later than April 1st** prior to the school year for which transportation is being requested.

Return completed form to: West Seneca Central Schools
Transportation Department
3300 Seneca Street
West Seneca NY 14224

Date of Request _____ For School Year _____

Name of Student _____ Birth Date ___/___/___

Street Address _____ Town _____ Zip _____

Phone: Home _____ Work/Cell _____ Start Date _____

School to be Transported to _____ Grade _____

School Address _____ Phone _____

Statement of Residency: I, by signing this statement, am testifying that my child is a legal resident of the West Seneca Central School District. Should the district find the above documentation to be false, the district will seek charges of theft of services, reimbursement for court costs and back tuition. In the event of attendance at a parochial or private school, transportation cost may be sought.

Transportation Requested By _____
(SIGNATURE OF PARENT OR LEGAL GUARDIAN)

Trans273-4/2013

TRANSPORTATION OFFICE USE ONLY

BIRTH CERTIFICATE RECEIVED	
<input type="checkbox"/> YES	<input type="checkbox"/> NO

AM Route No. _____ Pickup Location _____

A.M. Pickup Time _____ Existing Stop New Stop PM Route No. _____

PROOF PHOTO ID Date Processed ___/___/___ School Notified ___/___/___ Parent Notified ___/___/___



WEST SENECA CENTRAL SCHOOL DISTRICT

Administrative Offices • 1397 Orchard Park Road • West Seneca, New York 14224-4098

RESIDENCY VERIFICATION FORM

Student Name: _____

Address: _____

Student Date of Birth: _____

Parents/Person in Parental Relation: _____

ORIGINAL DOCUMENTATION SUBMITTED (ONE REQUIRED FROM SECTION A AND SECTION B)

Section A	Section B
<input type="checkbox"/> New York State Valid Driver's License <input type="checkbox"/> Non-driver's Identification Card	<input type="checkbox"/> Court/Agency Documentation <input type="checkbox"/> Documentation of Purchase of Home in District <input type="checkbox"/> Lease Agreement <input type="checkbox"/> Tax Bill
	<input type="checkbox"/> Notarized Statement from a Landlord *

** If no items from Section B (above) are available, a **Notarized Statement from a Landlord may be submitted together with two (2) additional proofs** which may include two from the following list:*

<p>NOTE: Each of these documents must show the address of residence.</p>	<input type="checkbox"/> One (1) - Car Registration <input type="checkbox"/> One (1) - Utility Bill <input type="checkbox"/> One (1) - Statement from a financial institution <input type="checkbox"/> One (1) - Payroll stub <input type="checkbox"/> One (1) - Government benefit document
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