



East Rochester Schools, District Office

222 Woodbine Ave. East Rochester, NY 14445 (585) 248-6302 Fax: (585) 586-3254
Website: <http://www.erschools.org>

January 2024

Dear Parent(s):

On the reverse side of this letter is a Private & Parochial School Transportation Request Form for the **2024-2025** school year. Please complete the transportation form on the reverse side so we can plan our bus routes for the fall.

In accordance with New York State Education Law, a new form must be submitted annually to the District, prior to April 1st to receive transportation services for the following school year. This must be done even if you are currently receiving transportation. You can use one form for up to three students as long as all students attend the same school.

If your child requires transportation for only part of the school year, you must submit a request before April 1st and indicate the time period when transportation is needed. If you do not know this, it is best to request transportation for the entire year. The district must know who needs transportation months in advance for planning and budgetary purposes.

East Irondequoit Central School District provides transportation for East Rochester Union Free School District resident students attending Private / Parochial Schools located between 2 and 15 miles from their home. *We only service dismissal times until 3:30pm & do not provide midday transportation; if such transportation is necessary it would be the parent's responsibility.*

It is necessary for you to complete the transportation / attendance form for your student if they plan on attending a Private / Parochial school even if they do not require transportation. If this applies to your family, please indicate on your form that your child will not be requesting transportation. We do need this information for reporting purposes and to supply textbooks and health services for our students.

Thank you for your prompt attention to requesting your child's transportation. If you have any questions, please call the East Irondequoit Transportation Department at 339-1526.

This form can also be accessed at the following url: <http://www.erschools.org/documents.cfm>

Sincerely,

Jim Cherrington

Jim Cherrington II, Director of Transportation



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Applications for 2024-2025 school transportation for pupils residing in the East Rochester School District to private and parochial schools must be filed on or before **April 1, 2024** (except where a family moves into the district after April 1, 2024 in which case applications must be made within 30 days after establishing residence in the district). East Rochester Union Free School District transportation policy provides transportation for pupils who live more than 2 miles from school. There is a fifteen-mile maximum for students attending private/parochial schools. Transportation is provided on an equal basis to pupils in the public schools and those attending private/parochial schools.

ANY FORMS NOT RECEIVED BY April 1, 2024 WILL NOT BE PROCESSED UNTIL AFTER THE START OF THE SCHOOL YEAR. TRANSPORTATION WILL BE PROVIDED ONLY IF THERE IS NO ADDITIONAL COST TO THE DISTRICT.

Please Note: A new application must be submitted annually whether or not the student attended the same school during the previous school year. Forms must be submitted to the Transportation Department before service can be provided.

Please allow up to thirty days to accommodate this request!

PLEASE COMPLETE A SEPARATE SHEET FOR EACH SCHOOL IF YOU HAVE MORE THAN ONE CHILD AND THEY ATTEND DIFFERENT SCHOOLS.

To: Board of Education, East Rochester Union Free School District

Inasmuch as I am a resident of the East Rochester Union Free School District, I hereby request transportation for my child(ren) to and from the school attended as follows: **PLEASE PRINT**

School Attending: _____ School Hrs: _____ AM PM

School Address: _____ Phone No. _____

Expectation: (Please circle one): Walker Parent Transports Ride Bus

Child's Name _____ Date of Birth _____ Grade* 2022-2023 _____

* If Kindergartner, please indicate school hours if different from above

Home Address _____ Home Phone No. _____

Transportation will be to and from home area unless otherwise specified. Zip Code _____

Father's Name _____ Phone (H) _____ (W) _____

Mother's Name _____ Phone (H) _____ (W) _____

If New Resident, Date of Residence: _____

Emergency Contact Information (in the event we are unable to contact parent(s)):

Name: _____ Phone (H) _____ (W) _____

Address: _____

Daycare Information (If applicable): (Please circle one)

Provider's Name: _____ AM only PM only AM & PM

Address: _____ Phone No. _____

Parent/Guardian Signature: _____ Date: _____

Mail completed form to
our transportation provider

East Irondequoit School District, Transportation Office — Jim Cherrington II,
125 Kane Drive, Rochester, NY 14622

