

BERLIN CENTRAL SCHOOL DISTRICT  
BERLIN, NEW YORK 12022

**REQUEST FOR TRANSPORTATION TO NON-PUBLIC SCHOOLS**

I, parent of the child/children listed below, residing at \_\_\_\_\_  
(Street or Road)

\_\_\_\_\_ in the Berlin Central School District hereby request transportation for  
(Town)

said child/children to \_\_\_\_\_ for the **2016-2017** school year.  
(Name of non-public school)

Address of non-public school \_\_\_\_\_

Time of session \_\_\_\_\_ AM to \_\_\_\_\_ PM.

**Check One Box**

\_\_\_\_\_ Child lives (children live) not  
more than 15 miles from the  
non-public school.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_ Child lives (children live) more  
than 15 miles from the non-public  
school.

\_\_\_\_\_  
(Please Print Name)

\_\_\_\_\_  
(Mailing Address)

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

**Name of Child**

*Last Name, First Name*

**Date of Birth**

**Grade**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Please return this to the Superintendent's Office at the Berlin Middle School/High School as soon as possible, but in any case no later than April 1, 2016. All textbook requests for next school year are due by June 1.**