



14665 State Route 22  
New Lebanon, NY 12125

## Private School Transportation Request

Date: \_\_\_\_\_

I hereby request transportation for my child/children to the following school:

Name and address of school: \_\_\_\_\_

For the \_\_\_\_\_ school year.

My residence is located \_\_\_\_\_ miles from the above mentioned school. (describe route used to measure mileage).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date residence established in the New Lebanon Central School District: \_\_\_\_\_

Parent/Guardian name and address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Signature of Parent or Guardian: \_\_\_\_\_

Name of Child	Date of Birth	Grade

**This form must be completed and returned by April 1<sup>st</sup> to:**

Leslie Whitcomb, Superintendent  
New Lebanon Central School District  
14665 State Route 22  
New Lebanon, NY 12125

When school is not in session at New Lebanon Central School, the District will not be providing transportation to any students attending a private school. Closings can occur due to weather, Superintendent's Conference days or vacations. Our calendar may be different from the calendar that your child's school follows. To view our District Calendar, please visit our website at:

[www.newlebanoncsd.org](http://www.newlebanoncsd.org)