



REGISTRATION FOR NON PUBLIC / PRIVATE SCHOOL
NORTH ROCKLAND CENTRAL SCHOOL DISTRICT
65 Chapel Street, Garnerville, New York 10923 (845)942-3493
Email – Registration@northrockland.org

NEW YORK STATE EDUCATION LAW, SECTION 3635, MANDATES THAT A WRITTEN REQUEST BE FILED EACH YEAR, **NO LATER THAN APRIL 1ST**, REQUESTING TRANSPORTATION TO A NON-PUBLIC SCHOOL FOR THE FOLLOWING SCHOOL YEAR.

SCHOOL TO WHICH STUDENT REQUESTS TRANSPORTATION **MUST BE WITHIN 15 MILES** OF THE STUDENT'S RESIDENCE.

NEW RESIDENTS: THIS FORM MUST BE **RECEIVED WITHIN 30 DAYS** OF ESTABLISHING RESIDENCY.

PLEASE NOTE: STUDENT MUST BE 5 YEARS OF AGE BEFORE **DECEMBER 1ST** OF THE CURRENT CALENDAR YEAR.

****LATE FILING MAY RESULT IN DENIAL OF REQUEST** ID# _____**

PLEASE NOTE: THIS FORM MUST BE COMPLETED FOR REGISTRATION PURPOSES, EVEN IF YOU ARE NOT GOING TO USE DISTRICT TRANSPORTATION TO YOUR PRIVATE SCHOOL.

DATE: _____ TRANSPORTATION IS REQUESTED FOR THE SCHOOL YEAR _____

GRADE IN SEPTEMBER: _____

NAME OF PRIVATE SCHOOL: _____

ADDRESS OF SCHOOL: _____

SCHOOL PHONE: _____ SCHOOL PRESENTLY ATTENDING: _____

TIME SCHEDULE OF SCHOOL: START TIME: _____ END TIME: _____

STUDENT'S LAST NAME: _____ FIRST: _____ MI: _____

GRADE: _____ GENDER: _____ DATE OF BIRTH: _____ PLACE OF BIRTH: _____

ADDRESS: _____

House # Street Apt# Town Zip Telephone # (home)

PLEASE ATTACH 2 COPIES OF PROOF OF RESIDENCE (UTILITY BILL, SIGNED LEASE, ETC) AND COPY OF BIRTH CERTIFICATE, PARENT PHOTO ID

PARENT/GUARDIAN 1 INFORMATION:

RELATIONSHIP TO CHILD: _____

LAST NAME: _____ FIRST: _____ MI: _____

HOME#: _____ BUSINESS#: _____ CELL#: _____

PARENT/GUARDIAN 2 INFORMATION:

RELATIONSHIP TO CHILD: _____

LAST NAME: _____ FIRST: _____ MI: _____

HOME#: _____ BUSINESS#: _____ CELL#: _____

WHAT LANGUAGE(S) IS SPOKEN IN THE STUDENT'S HOME? _____ ENGLISH _____ OTHER _____

DOES YOUR CHILD HAVE AN IEP? _____ YES _____ NO

*****PLEASE COMPLETE BOTH SIDES OF THIS FORM*****

STUDENT RACIAL AND ETHNIC IDENTIFICATION:

1. IS THE STUDENT HISPANIC, LATINO, OR OF SPANISH ORIGIN? Hispanic, Latino, or of Spanish origin means a person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture or origin, regardless of race.

_____ **YES**, Hispanic _____ **NO**, not Hispanic

2. SELECT ONE OR MORE RACES FROM THE FOLLOWING FIVE RACIAL GROUPS (Please check all groups that apply to your child)

_____ American Indian or Alaskan Native _____ Native Hawaiian or other Pacific Islander
 _____ Asian / Oriental _____ White
 _____ Black or African American

SIBLINGS:

Name: _____ DOB: _____ Name: _____ DOB: _____

Name: _____ DOB: _____ Name: _____ DOB: _____

Name: _____ DOB: _____ Name: _____ DOB: _____

I am stating that all the information provided on this form is true and accurate. I understand that it is my responsibility to notify the school and NRCSD Registration/ Transportation Office should any information change.

SIGNATURE OF PARENT / GUARDIAN: _____ DATE SIGNED: _____

PLEASE REMEMBER TO ATTACH A COPY OF THE BIRTH CERTIFICATE AND 2 VALID COPIES OF PROOF OF RESIDENCY AND A COPY OF PARENT PHOTO ID THIS INCLUDES: CURRENT UTILITY BILL, SIGNED LEASE, SIGNED CLOSING OR HUD STATEMENT.

**** WE CANNOT ACCEPT TERMINATION OR DISCONNECT NOTICE****

***** OUR EMAIL ADDRESS REGISTRATION@NORTHROCKLAND.ORG**

FOR OFFICE USE ONLY

DATE REGISTERED: _____ REGISTRATION COMPLETED BY: _____

PROOF OF BIRTH: _____ PROOF OF RESIDENCE: _____

STUDENT ID # _____

IF APPLICABLE:

DATE OF ENTRY INTO THE UNITED STATES _____ IMMIGRANT INDICATOR _____

Please Note: Change of schools with transportation cannot be made after the April 1st deadline for registration.