

## NORTHAMPTON AREA SCHOOL DISTRICT TRANSPORTATION DEPARTMENT

Dear Parent,

According to Pennsylvania Law, nonpublic school children are entitled to transportation to nonpublic schools as follows:

- A district which provides transportation for resident public school students must also make identical provisions for the transportation of resident nonpublic school students.
- Transportation for nonpublic school students must be provided to and from the nonpublic school in which the student is
  enrolled. This also applies to nonpublic schools located outside the district, so long as the distance is not more than ten (10)
  miles beyond the public school district boundaries. (NOTE: This distance may be in excess of ten (10) miles from the
  student's home.)
- A district may transport children who live along hazardous routes, even though the children live within walking distance of the school.

If you think you are eligible for transportation, and desire it for next term, please complete the Request for Transportation form below and return it to your child's school as soon as possible.

Signed	
	Principal

## **REQUEST FOR TRANSPORTATION UNDER ACT 372**

(Please complete a separate form for each child requiring bus transportation next school year.)

1.	Child's Name:	Birtl	ı date:	Grade entering:			
2.	Address (if rural address, indicate specific location)						
3.	Public school district in which child resides: Northampton Area School District						
4.	Name of nonpublic school attending in September (next school year):						
5.	The above named child lives approximately miles from the nonpublic school he/she will be attending.						
6.	f your child received public school district transportation last year, please indicate:						
	Bus number: District:						
		orm needs to be filled out each					
		Mother Information	Father Information	<u>on</u>			
	Name (please print):			<u>.</u>			
	Home phone:						
	Cell phone:			· · · · · · · · · · · · · · · · · · ·			
	Work phone:			····			
Pare	ent(s) Signature:			Date:			
Г	Control No. 10 Pt	No. No. 1 and Alberta					
cme	ergency Contact Names & Ph	one Numbers (other than parents):					
	Name:	Phone:	Cell:				
	Name:	Phone:	Cell:				



Northampton Area School District Transportation Office 2014 Laubach Avenue Northampton, PA 18067 610-262-7811, ext. 6

## NON-PUBLIC STUDENT INFORMATION

Please print clearly

SCHOOL NAME:	Date:			
Addition	☐ Deletion		Change	
STUDENT INFORMATION				
Name of Student:		Date of Birth	ŧ:	
Address:	Age:	Grade:	Sex: M F	
City, State, Zip Code:				
Telephone Number:	School ID #;			
Parent/Guardian:		-1-4-4		
TRANSPORTATION STATUS (please of	check)			
No Transportation Requested				
Yes Transportation Requested	Act #372 J	Form Included	. 1716	
1				
_	Signature	e	Date	
	Do not write in space below.			
TRANSF	PORTATION ASSIGN	MENT		
		Date Received	d:	
Bus Number:	Pickup Time (approx.):			
Parents Notified On:	Dro	op Off Time (appro	ox.):	
Comments:			·	
	<u></u>			
<del></del>	Transportation S	Supervisor	Date	