

SMITHTOWN CENTRAL SCHOOL DISTRICT
26 NEW YORK AVENUE, SMITHTOWN, NEW YORK 11787-3435
TRANSPORTATION
(631) 382-4100

January 6, 2025

Dear Parent/Guardian:

Enclosed you will find the Smithtown Central School District private and parochial transportation application for the 2025-2026 school year.

*Any returning students who have no changes from last year may fill out the enclosed form and mail it as directed on the application prior to the **April 1, 2025** deadline.*

*All newly registering students attending private or parochial schools or any returning private and parochial students who have changes to their school or address will need to contact the Smithtown Central School District central registration office in order to be considered for transportation, receive textbooks, and/or other educational services. Registration must take place prior to the **April 1, 2025** deadline via email at registration@smithtown.k12.ny.us.*

If you have any questions or concerns regarding transportation, please call the Transportation Department at 631-382-4100.

Sincerely,

Mary Augugliaro

Transportation Supervisor

MA/sg

SMITHTOWN CENTRAL SCHOOL DISTRICT
PRIVATE AND PAROCHIAL SCHOOL TRANSPORTATION APPLICATION
FOR SCHOOL YEAR 2025-2026
THIS FORM MUST BE FILED PRIOR TO APRIL 1, 2025

*New Private & Parochial students or anyone changing school or address must register via email at
registration@smithtown.k12.ny.us

Returning Private & Parochial students, without any changes from last year, may mail their completed application to
SCSD 26 New York Ave Smithtown 11787 (attn: Transportation)

DATE OF APPLICATION _____

NAME OF STUDENT _____
(Last) (First)

LEGAL ADDRESS: _____
(Street) (Town) (Zip)

DATE OF BIRTH: ____/____/____ GRADE ENTERING IN SEPTEMBER 2025 _____

NAME OF PARENT/GUARDIAN: _____

HOME NUMBER: _____ WORK NUMBER: _____

EMERGENCY CONTACT NAME: _____ CONTACT NUMBER: _____

SCHOOL THE STUDENT IS CURRENTLY ATTENDING OR TRANSFERRING FROM: _____

TRANSPORTATION INFORMATION

In accordance with the laws of New York State, I hereby formally request transportation for my child to:

NAME OF SCHOOL: _____

ADDRESS OF SCHOOL: _____

For the school year 2025-2026 School Hours _____

IMPORTANT – PLEASE NOTE THE FOLLOWING REQUIREMENTS:

*ANY NEW RESIDENT REQUESTING TRANSPORTATION TO A PRIVATE AND PAROCHIAL SCHOOL OR ANYONE WITH A CHANGE OF ADDRESS MUST PROVIDE THE PROPER DOCUMENTATION AS DESIGNATED BY SCSD CENTRAL REGISTRATION OFFICE

PROOF OF RESIDENCY MUST BE SUBMITTED PRIOR TO PROCESSING A TRANSPORTATION REQUEST.

*Entering kindergarten students must be 5 years of age by December 1, 2025
in the school year of attendance, in order to be considered for transportation.*

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|----------------------|
| ROUTE# _____ |
| STOP ASSIGNED |
| _____ |

SIGNATURE OF PARENT OR GUARDIAN