



# Averill Park Central School District

Transportation Department

145 Gettle Rd ❖ Averill Park, NY 12018

[apbus@apcsd.org](mailto:apbus@apcsd.org) ❖ (518) 674-7070

<https://www.averillpark.k12.ny.us/services/transportation-services/>

Office Use Only	
Student ID	
Rec'd Date	
Date Processed	
Criteria	

Residents of the Averill Park School District who are eligible for transportation to non-public schools under the 15-mile limit are required to file an application each year by April 1 for such transportation for the following school year, in accordance with NY Education Law §3635-2.

Complete and return this form only if you wish to request transportation to a private school(s) for your children.

**For the Transportation Start Date of September 2026 this form must be submitted by April 1, 2026.**

## Request for transportation to non-public schools for 2026-2027

**IMPORTANT NOTE:** You must complete a separate application for each student. The School Information portion of the application may be submitted after the application. You must ensure that page is filed as soon as your student's enrollment is confirmed. Incomplete applications cannot be processed. Information changes can take up to three business days. All information must match the Averill Park CSD Student Information System.

Name of Private School: _____							
Student Information				Transportation Requested (✓)			
Student Name Last, First, Middle, Suffix	Gender	Birthdate	Grade As of Sep 2026	AM	PM	On Call AM	On Call PM
Residential Information							
Street Address				City, State, Zip			
Resides With	<input type="checkbox"/> Both Parents <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other _____			Receives Mail?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Mailing Address (If Different)							
Address				City, State, Zip			

Student's Siblings (Include those who have not yet reach school age.)	Gender	Birthdate

Parent/Guardian Information	
Full Name of Parent/Guardian:	Circle one <b>Parent</b> or <b>Guardian</b>
Email Address:	Tel:
Other Parent/Guardian Information	
Full Name of Parent/Guardian:	Circle one <b>Parent</b> or <b>Guardian</b>
Email Address:	Tel:

Student Name \_\_\_\_\_ 2026-27 Grade \_\_\_\_\_

<b>Transportation Information</b>			
Transportation is provided to and from the student's residence or a licensed day care provider, only within the Averill Park Central School District.			
Transportation to school from home (AM)	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday		
Transportation to home (PM)	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday		
Transportation to school from another site (AM) <i>provide details below</i>	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday		
Transportation from school to another site (PM) <i>provide details below</i>	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday		
Days that no transportation is needed to school (AM)	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday		
Days that no transportation is needed from school (PM)	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday		
<b>Alternate Site Information</b>			
<b>Address</b>		<b>City, State, Zip</b>	
<b>Destination Type</b>	<input type="checkbox"/> Other Parent <input type="checkbox"/> Licensed Day Care	<b>Contact Name</b>	
<b>Contact #</b>		<b>Contact Email</b>	
<b>Comments</b>			

<b>Pertinent Student Information</b>	
Is your student diabetic or have any severe allergies, seizure disorder or other medical concerns?	<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> If yes, please provide additional information here:
Emergency Phone #:	Emergency Contact:
Parent/Guardian Signature:	

**IMPORTANT INFORMATION FOR PARENTS/GUARDIANS**

- Although your student may be attending a non-public school, your student must be registered with the Averill Park Central School District. For more details and contact information, please refer to our website at <https://www.averillpark.k12.ny.us/district-office/register-a-student/>. Registration should be done before the April 1 deadline.
- The deadline for this application is April 1 of the prior school year or within 30 days of moving into the school district.
  - All student registration information on the application must match the APCSD Student Information System. If you need to provide updates to the district, please contact the district registrar.
  - Incomplete applications, or applications with information that does not match the APCSD system, cannot be accepted and will be returned within 5 business days to the parent/guardian's email address that is on the student's APCSD registration.
  - **APPLICATIONS RECEIVED AFTER THE APRIL 1 DEADLINE:** Transportation will only be provided if space is available on an already scheduled bus to the school being requested. Late applications may experience a delay in processing.
  - For your convenience, APCSD provides multiple ways to submit the application:

Mail	Email	In-Person
Averill Park CSD Transportation Department 145 Gettle Rd Averill Park, NY 12018	<a href="mailto:apbus@apcsd.org">apbus@apcsd.org</a>	145 Gettle Rd Averill Park, NY 12018

- Any changes during the school year, must be submitted on a new application. We cannot guarantee that service will be available to accommodate the change.
- APCSD provides transportation on days when APCSD is in session. Please review the current school calendar on our website at <https://www.averillpark.k12.ny.us/>. Please watch for emergency closings. APCSD does not provide transportation during an emergency closing, such as a snow day.
- If your student will not be taking the bus, parents/guardians must notify the transportation department. The best way to notify the department is to send an email to [apbus@apcsd.org](mailto:apbus@apcsd.org) or call (518) 674-7070.
- School Bus Safety information may be found on our website at <https://www.averillpark.k12.ny.us/services/transportation-services/>
- You may find additional information regarding transportation to non-public school on New York State Education Department's website at <https://www.nysed.gov>.
- If you have any questions regarding this application, please contact the Transportation Department by email to [apbus@apcsd.org](mailto:apbus@apcsd.org) or call (518) 674-7070.

**Parent/Guardian Certification**

I hereby certify the following:

1. that I became a resident of the Averill Park Central School District on \_\_\_\_\_,
2. and that all information provided in this application is accurate and
3. I have reviewed the IMPORTANT INFORMATION FOR PARENTS/GUARDIANS section above.

\_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_

Date Signed

*Please submit the first 3 pages of the application to the Transportation Department as soon as possible. The next page must be completed by a school official at your student's school.*

<b>*TO BE COMPLETED BY SCHOOL ADMINISTRATOR*</b> <b>School Information</b>			
This page must be completed by your student's school and sent to the Transportation Department.			
<b>Name of Administrator providing this information:</b> _____			
<b>School Address:</b> _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Street Address</span> <span>City</span> <span>Zip</span> </div>			
<b>School Telephone #:</b> _____		<b>School Website:</b> _____	
<b>Earliest Drop off time:</b> _____	<b>Start Time:</b> _____	<b>End Time:</b> _____	<b>Latest Pickup Time:</b> _____
<b>Contact Information</b>			
<b>Point of Contact Name:</b> _____ <b>Title:</b> _____ <i>If not Principal, please provide the Principal's information below.</i>			
<b>Telephone #:</b> _____		<b>Email Address:</b> _____	
<b>Principal Name:</b> _____			
<b>Telephone #:</b> _____		<b>Email Address:</b> _____	
<b>Principal's Certification</b>			
I hereby certify that the student named in this application is enrolled in _____ and I have attached a copy of our 2026-2027 school calendar.			
_____ Principal's Signature		_____ Date Signed	

- APCSD provides transportation on days when APCSD is in session. Please review the current school calendar on our website at <https://www.averillpark.k12.ny.us/>. Please watch for emergency closings. APCSD does not provide transportation during an emergency closing, such as a snow day.
- If you have an emergency closing or updates, please notify the Transportation Department at [apbus@apcsd.org](mailto:apbus@apcsd.org).
- If you have any questions, below is our contact information.
- Please send this completed form and your 2026-2027 school calendar to:

Mail or In-Person	Email	Telephone
Averill Park CSD Transportation Department 145 Gettle Rd Averill Park, NY 12018	<a href="mailto:apbus@apcsd.org">apbus@apcsd.org</a>	(518) 674-7070