

PRIVATE SCHOOL TRANSPORTATION REQUEST

Please select your local school district from the list below:				
Cazenovia ESM Syracuse City	James	Jamesville-DewittLaFayett		
In accordance with New York State Law, I am formally re Manlius Pebble Hill School in Onondaga County for the 201 in session. I understand that the distance to the School f and that my request needs to be made by April 1. Reque case-by-case basis and are at the discretion of the district. hereby authorize Manlius Pebble Hill School to act as my rethe event I need them to do so. STUDENT INFORMA	.8-2019 sch rom my ho sts made a In addition epresentati	ool year on all dome cannot exception from the cannot except fter April 1 will to making this	lays that school is eed fifteen miles, be reviewed on a request directly, I	
Student Name	M/F	Date of Birth	Grade Entering	
PARENT/GUARDIAN INFORMATION				
Parent/Guardian Name:				
Street Address:				
City:	Zip:	Zip:		
Home Phone:	Cell:			
ALTERNATE/EMERGENCY CONTACT:				
Name:				
Phone Number:				
I hereby certify that I am a resident of the district set that the students listed herein will attend Manlius Pe year.			•	
Signature of Parent:		Date:		
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