SETON CATHOLIC CENTRAL
70 SEMINARY AVE.
BINGHAMTON, NY 13905

TRANSPORTATION

TO WHOM IT MAY CONCERN:

In accordance with Section 3635 of the New York State Education Law, I hereby formally request transportation for the following students from the

_____MONTROSE_____ School District

STUDENT NAME	AGE	GRADE
_____	____	_____
_____	____	_____
_____	____	_____
_____	____	_____
_____	____	_____

to Seton Catholic Central, Broome County, during the 2022-2023 School Year.

The pupil(s) for whom I am requesting transportation reside(s) at:

_____

_____

In addition to making this request directly, I wish to inform you that I have authorized the Principal of Seton Catholic Central, or his/her successor in that position, to be my representative in requesting transportation for my child/children.

This authorization is to remain in effect while I have my child/children in attendance at Seton Catholic Central or unless I expressly revoke this request.

_____
Signature of Parent of Legal Guardian

THIS FORM IS TO BE RETURNED TO SETON CATHOLIC CENTRAL BY March 31, 2022.