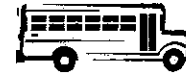


Saratoga Springs City Schools
 Application for Transportation to a
 Non-Public School
 (2010-2011 School Year)



**THIS APPLICATION MUST BE RECEIVED BY
 APRIL 1ST TO BE ELIGIBLE FOR TRANSPORTATION
 FOR THE NEXT SCHOOL YEAR.**

TRANSPORTATION DATE STAMP HERE

PLEASE COMPLETE EACH SECTION BELOW.

Parent/Guardian Name: _____
 Street Address: _____
 City or Town: _____
 Home Phone: _____ Work Phone: _____

I am requesting that the Saratoga Springs City School District provide transportation for my child(ren) listed below to

 Name of Non-Public School

 Address of Non-Public School

I certify that the child(ren) listed below will be enrolled in the above school for the 2010-2011 School Year.

| Child's Name | Age | Date of Birth | Grade Entering |
|--------------|-----|---------------|----------------|
| | | | |
| | | | |
| | | | |

School previously attended: _____

This application must be received by April 1, 2010. All applicants must attach a "Proof of Residency" document (Instructions on back) to this application. Applications will not be accepted without "Proof of Residency."

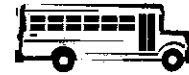
I hereby certify that I became a resident of the Saratoga Springs City School District on ____ / ____ / ____.

Please be sure all information is completed in full and place your signature and date on the line below. Be sure Proof of Residency is enclosed with application; otherwise the application may not be accepted.

Parent/Guardian Signature: _____

Date: ____ / ____ / ____

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