



Guilderland Central School District

Transportation Department
 PO Box 382 ❖ Guilderland Center, NY 12085
<https://www.guilderlandschools.org/district-services/transportation/>

Office Use Only	
Student ID	
Family #	
Rec'd Date	
Criteria	

Residents of the Guilderland School District who are eligible for transportation to non-public schools under the 15-mile limit are required to file an application each year for such transportation in accordance with Chapter 363 of the New York State Laws of 1960.

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

For 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. Incomplete applications will not be accepted. Information changes can take up to three business days. All information must match the Guilderland 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
	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary						
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			

I believe the request listed above complies with the 15-mile residence-to-school regulation.

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

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

Transportation Information	
Transportation is provided to and from the student's residence or a licensed day care provider, only within the Guilderland 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
Alternate Site Information	
Address	City, State, Zip
Destination Type	Contact Name
<input type="checkbox"/> Other Parent <input type="checkbox"/> Licensed Day Care	
Contact #	Contact Email
Comments	

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

**** PROCEED TO NEXT PAGE****

School Information *TO BE COMPLETED BY SCHOOL ADMINISTRATOR*

Name of Administrator providing this information: _____

School Address: _____
Street Address City Zip

School Telephone #: _____ School Website: _____

Earliest Drop off time: _____ Start Time: _____ End Time: _____ Latest Pickup Time: _____

Contact Information

Point of Contact Name: _____ Title: _____

If not Principal, please provide the Principal's information below.

Telephone #: _____ Email Address: _____

Principal Name: _____

Telephone #: _____ Email Address: _____

Principal's Certification

I hereby certify that the student named in this application is enrolled in _____ and I have attached a copy of our 2025-2026 school calendar.

Principal's Signature Date Signed

IMPORTANT INFORMATION FOR PARENTS/GUARDIANS

- Although your student may be attending a non-public school, your student must be registered with the Guilderland Central School District. For more details and contact information, please refer to our website at <https://www.guilderlandschools.org/district-services/registration/>. 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 GCSD Student Information System (SIS). 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 SIS, cannot be accepted and will be returned within 5 business days to the parent/guardian's email address that is on the student's GCSD 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. No applications will be considered if a bus is not already transporting students to that school. Late applications will experience a delay in processing.
 - For your convenience, GCSD provides multiple ways to submit the application:

Mail	Email	Stopfinder App	In-Person
Guilderland CSD Transportation Department PO Box 382 Guilderland Center, NY 12085	Transportation@guilderlandschools.net	Photos or a pdf of the completed application may be submitted through the app.	9 Dutchman Lane Guilderland Center, NY 12085 <i>*Located in the back building behind the Guilderland Center Firehouse off School Rd.</i>

- 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.
- GCSD provides transportation on days when GCSD is in session. Please review the current school calendar on our website at www.guilderlandschools.net. Please watch for emergency closings. GCSD does not provide transportation during an emergency closing, such as a snow day.
- Parents/Guardians are encouraged to take advantage of the Stopfinder app. This is how transportation information and updates are provided. Additionally, parents/guardians may contact the transportation department through the app. This application may be uploaded and submitted through the app.
- If your student will not be taking the bus, parents/guardians must notify the transportation department. The best way to notify the department is through the Stopfinder app. You may also send an email to transportation@guilderlandschools.net or call (518)861-6434.
- School Bus Safety information may be found on our website at <https://www.guilderlandschools.org/district-services/transportation/school-bus-safety/>.
- 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 through the Stopfinder app. You may also send an email to transportation@guilderlandschools.net or call (518)861-6434.

Parent/Guardian Certification

I, hereby certify the following:

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

Parent/Guardian Signature

Date Signed