Half Hollow Hills CSD TRANSPORTATION DEPARTMENT 25 Burrs Lane + Dix Hills, NY 11746 + Phone (631) 592-3855 + Fax (631) 592-3897 <u>Maurita Coleman Simpson, Transportation Supervisor</u>			
2021-2022 School Year Private School Transportation Application			
PLEASE PRINT CLEARLY AND FILL IN <u>ALL</u> INFORMATION			
Half Hollo please visit <u>https://wy</u>	ww.hhh.k12.ny.us/district/studen	not currently nt-registration	the student MUST be a registered registered with our district, for registration information and links.
			Date of Birth://
Address:	#/ STREET	·	TOWN, ZIP
Home Telephone: (Grade (in 21-22) :
Mother's Name:			Mother's Cell: ()
			Father's Cell: ()
Name of school student w	vill be attending:		· · ·
School Address:	#/STREET		TOWN, ZIP
			1000,20
School Phone: ()	Date	e student will start school://
Parent/Guardian Signature	e		
SUBMITTED A		<u>ION TO P</u> HOOL DIS	<u>RIVATE SCHOOL MUST BE</u> STRICT BEFORE APRIL 1ST.
	receipt of this application	-	•
This application is also available in electronic form via email. Send a request to <u>prischools@hhh.k12.ny.us</u>			
If at any time		quires busi	ng, please contact our office.
TRANSPORTATION OFFICE USE ONLY			
Application received on:	By:	V	ia: