PLAINEDGE PUBLIC SCHOOLS
TRANSPORTATION OFFICE
241 WYNGATE DRIVE, N. MASSAPEQUA, NY 11758
PHONE (516) 992-7490 FAX (516) 992-7489

DR. CHRISTOPHER ZUBLIONIS
SUPERINTENDENT OF SCHOOLS

BRIAN MCCARTHY
SUPERVISOR OF TRANSPORTATION

REQUEST FOR TRANSPORTATION FOR SCHOOL YEAR 2026-2027

Use this form ONLY if you have already REGISTERED with Plainedge School District and have not changed your residency

To be eligible for transportation:

A. The student must reside in the Plainedge School District.
B. Not reside more than 15 miles from the school of attendance.
C. Grades K-5 students residing more than ¾ miles from the school of attendance.
D. Grades 6-8 students residing more than ¼ miles from the school of attendance.
E. Grades 9-12 students residing more than 1½ miles from the school of attendance.

*An application must be completed for **EACH** child for whom the transportation is requested.

*Applications must be submitted annually, no later than **APRIL 1st**, of the prior school year OR

*Such written requests must be made within 30 days of establishing residency.

*Failure to meet the April 1st deadline may result in denial of transportation.

Return the completed application by April 1, 2026 to:
Plainedge Public Schools • Transportation Office,
241 Wyngate Dr., P.O. Box 1669, N. Massapequa, N.Y. 11758-0912

STUDENT NAME: _____

STUDENT ADDRESS: _____

PHONE: _____ BIRTH DATE: _____ GRADE (for September) _____

SCHOOL NAME: _____

SCHOOL ADDRESS: _____

SCHOOL PHONE: _____ **SCHOOL** HOURS: _____ AM to _____ PM

*PREVIOUS SCHOOL OF ATTENDANCE: _____

PARENT SIGNATURE: _____ **DATE:** _____

***PLAINEDGE REGISTRAR SIGNATURE:** _____
***(IF NOT PREVIOUSLY REGISTERED AT REQUESTED SCHOOL)**