Crestwood School District
281 South Mountain Boulevard
Mountain Top, PA 18707
(570) 868-3161

IMPORTANT – PLEASE READ

To Parents/Guardians of Non-Public School Students:

With the school year swiftly approaching, the Crestwood School District is finalizing plans to support the transportation needs of students who attend non-public/private schools. In order for the Crestwood School District to provide transportation services to students who reside within the boundaries of the district and attend to non-public/private schools, the residency of these students need to verified. In an effort to ensure that every student residing within the Crestwood School District is appropriately rostered to district transportation, the district is requesting that parents/guardians complete the Crestwood School District Non-Public/Private School Enrollment Packet and submit it to Crestwood with copies of the requested documents (please see below). This packet includes a Busing Registration Form which must be submitted annually, even if your child does not utilize Crestwood School District transportation on a daily basis.

The completed packet/Busing Registration Form should be scanned and emailed to Ms. Stephanie Otero at stephanie.otero@csdcomets.org or Ms. Sarah Smigelski at sarah.smigelski@csdcomets.org no later than Friday, August 16, 2019. In lieu of not receiving requested paperwork, your student may not be provided transportation provisions for the start of the school year.
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This packet is not complete without submission of copies of the following documents:

- Three proofs of residency (for acceptable proofs of residency, see below)

Crestwood School District Acceptable Proofs of Residency (Three Required)

The initial proof of residency document should be one of the following:

- Property Deed
- Agreement containing your name and verified by building owner

Additionally, support the above document with any two of the following:

- PA Department of Transportation identification or driver’s license
- Program enrollment (ie: including, but not limited to, TANF or CHIP)
- 2 statement/IRS statement or tax return
- Tenant’s insurance statement
- Current utility bill/cell phone bill
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Date _______________________

Student full (legal) name, according to birth certificate, adoption, court record:
_________________________________________ (First Middle Last)

Grade: _____ Age: _____ Student’s Place of birth: ________________________________

Birthdate: ________________________________

Gender: M / F (Prefer not to respond) Resident: Yes / No

Has student been enrolled in Crestwood SD before? Yes / No School: __________________

Parent/Guardian ____________________________

Home address: ______________________________

City: ___________________________ State: _____ Zip: __________

Home Phone: ______________________________
Cell Phone: _______________________________
Work Phone: ______________________________
Sibling: __________________________ Grade: ___
Sibling: __________________________ Grade: ___
Sibling: __________________________ Grade: ___

Emergency Contact: ________________________________

Phone: ________________________________

Relationship to student: ________________________________

2nd Phone: ________________________________
Crestwood School District

Busing Registration Form

School student will be attending:

Registration date: ____________________ School Year: ____________________
Grade: ____________________

Bus To: (Circle One) Secondary Campus / Rice / Fairview / Non-Public School
Bus From: (Circle One) Secondary Campus/ Rice / Fairview / Non-Public School

Name: ____________________
Birthdate: ____________________
Street Address: ____________________
City/Town: ____________________

Parent/Guardian: ____________________
Phone: ____________________

IMPORTANT INFORMATION REGARDING BEFORE AND AFTER SCHOOL CHILD CARE:
If a student is to be picked up in the morning and returned to a child care center at dismissal time, please give the name of the center, center contact, address and telephone number. THIS IS TO BE ON A DAILY BASIS.

Daycare Center: ____________________
Daycare Center Contact: ____________________
Address of Daycare Center: ____________________
Phone Contact: ____________________