



50 South Main Street, West Hartford, CT 06107 Phone: (860) 561-6600 Website: http://www.whps.org

April 7, 2023

West Hartford Private/Parochial Parent:

*****A transportation form MUST be submitted annually in order to be added to a bus route.**

- Transportation is provided only to families who reside in West Hartford and meet the eligibility requirements of living more than 1 mile for elementary, 1.5 miles for middle school and 2 miles for high school students. This mileage is the distance to/from home and school.
- If your address has not changed and/or if your child attended a West Hartford Public School or you used Private/Parochial busing last year you DO NOT need to verify your residence with the registrar's office. Simply fill out the bottom of this form and return to us by mail, fax or email (damaris_torres@whps.org and jennifer_murphy@whps.org)
- All families moving into or within West Hartford or requesting transportation for the **FIRST** time, **must** verify their residency prior to us accepting this form. Please email(residency@whps.org) or fax (860-561-6928) the following to WHPS Residency Office for verification: 1) your proof of residency(mortgage statement, homeowners insurance, property tax bill or current lease agreement with Landlord signature(s) or Property Management contact info). 2)utility bill showing service address(no older than 30 days) If you have not received a utility bill yet, you may call *CNG at (860)524-8361* or *Eversouce at (800)286-2000* and request a **confirmation of service** for your new address. 3)your valid photo identification(ID)

Requests must be received in the transportation office no later than Wednesday, July 5, 2023 in order to be processed for the first day of the school. Forms received in this office after this date will not be processed until after, Friday, August 25, 2023. Parents will be responsible for transportation arrangements until transportation is set up and notification is sent to you by this office.

Thank you,

Damaris Torres, District Transportation Coordinator

2023-2024 Private/Parochial TRANSPORTATION REQUEST
50 So. Main St. Room 417, West Hartford, CT 06107- Tel. 561-6647, Fax 561-6929

Date: _____ Grade: _____ Student's Gender: _____ Date of Birth: _____

Student's Name: _____ Home Phone#: _____

Address: _____ Zip Code _____

Parent/Guardian Name: _____ Cell Phone #: _____ Email: _____

Parent/Guardian Name: _____ Cell Phone #: _____ Email: _____

School Attending: _____ Previous School & Town: _____

I am requesting transportation: Both ways To school only From school only

To inspire and prepare all students to realize their potential and enhance our global community.