

Transportation Information for incoming 2026-27

Mandatory: All Families must complete and submit the two forms listed below **EVEN IF** your child is not planning on using the bus as transportation to SJV.

1. Individual Pupil Request for Loan of Textbooks (list next year's grade)
2. Nonpublic School Transportation Application Form **

***This form is very important for your town to have on file. If you are eligible for transportation and your town is unable to provide it, you might receive an Aide in Lieu payment. Without this form, your town will have no record of your child attending SJV.*

Some towns also require information **in addition** to the forms listed above.

If you pay your property taxes to any of the towns listed below, please submit the appropriate information listed.

****If you do not** live in the towns listed below, you only have to submit the first two forms mentioned above. **

Middletown,

Middletown Certification of Address and Eligibility form (FORM A)

Old Bridge,

Old Bridge Proof of Residency Form (FORM B), and provide copies of information listed on FORM B

Sayreville and South River

Current Driver's License

and **One** of the following:

Current Tax bill or receipt

Bank Mortgage statement

Rental or Lease agreement

A contract to purchase a home

Notarized letter from property owner or landlord

Copy of property deed

Middletown Board of Education
P.O.Box 4170 Middletown, NJ 07748
P.O. Box 4170
Middletown, NJ 07748
viningb@middletownk12.org
Transportation Department
732-671-3850 ext. 1007

Certification of Address and Eligibility

To: Parent/guardian of students enrolled in non public schools who indicate that Middletown is the Resident District Board of Education

From: Middletown Board of Education

I do hereby attest and certify that all information on the B6T Application for Private School Transportation form is true and correct, including the home address and corresponding school district of residence for my child.

I also understand that Middletown Board of Education will be doing periodic verifications of residency, requiring proofs of residency from parents/guardians of students attending non public schools and that upon request by Middletown Board of Education, I will present such verification.

School year: 2026-2027

Child's name: _____

Address: _____

Parent/guardian name: _____

Parent/guardian signature: _____ Date: _____

OLD BRIDGE BOARD OF EDUCATION
TRANSPORTATION DEPARTMENT
4205 Highway 516
MATAWAN, NJ 07747

2026-2027 PROOF OF RESIDENCY FORM

Dear Parent/Guardian:

Please complete the required proof of residency form to receive your 2026-2027 aid. Return this form with a copy of your photo driver's license AND proof of residency (see below) as soon as possible. If there is a change of home address from one school district to another, a new application must be submitted to the new public school district.

STUDENT NAME:

SCHOOL TO BE ATTENDED:

STUDENT GRADE:

PARENT/GUARDIAN NAME:

(If guardian, guardianship documentation is necessary)

PROOF OF RESIDENCY REQUIRED

****If you own your residence, please provide ONE of the following (3) documents:**

DEED
BANK MORTGAGE STATEMENT
PROPERTY TAX RECEIPT FOR CURRENT YEAR

AND

ONE utility bill (gas, water, electric, cable or phone)

****If you rent your residence, please provide a copy of your current lease and TWO utility bills**

Note: Expired leases are not accepted

If you are living with a family, the family you are living with must complete the HOST family affidavit and provide proof of that residence (see above). The parents must also provide two items to prove proof of address. I.e. driver's license, phone bill, cable bill or any other utility bill.

****INCLUDE A COPY OF PHOTO DRIVER'S LICENSE ALONG WITH THE PROOF OF RESIDENCY ****

Nonpublic School Transportation Application Form

School Year: 2026-27 Resident District Board of Education:

Student Name:

Last

First

Middle

Date of Birth (mm/dd/yy):

Parent/Guardian Name:

Daytime Phone:

Email Address:

Area code + number

Home Address:

City:

Zip:

Mailing Address:

City:

Zip:

Full name of school to be attended: Saint John Vianney
High School

Phone: 732-739-0800

Area code + number

Address of School: 540 A Line Rd
Holmdel NJ 07731

Student's grade for the coming year:

Shortest one-way mileage between home and school:

(shortest route along public roadways or
walkways to the nearest tenth of a mile)

Date school opens (mm/dd/yy): 09/08/26

Date school closes (mm/dd/yy): 06/18/27

School hours: 8:00 AM to 2:23 PM

Name of school of attendance in prior year:

Address:

Signature:

Date (mm/dd/yy):

Public School Use Only (Do *not* write below this line)

Your application has been reviewed by the resident district board of education. The following determination has been made:

Transportation will be provided

You are eligible for payment in lieu
of transportation

Ineligible

Reason:

Title:

Signature:

Date (mm/dd/yy):