



Spring Lake Park High School Transportation Registration Form

SPRING LAKE PARK SCHOOLS

All students at Spring Lake Park High School (SLPHS) who live outside the walk area must register for bus service. We can optimize school bus route planning if we know which students will ride the bus. If your student(s) will require transportation for the coming year, please complete this form and return it to our office or include all the information requested below in an e-mail to transportation@district16.org. If you waive transportation services by not registering at this time, you can re-establish busing at any time by contacting us. There may be a delay of 3-5 business days before transportation is available. During this time, it is the parent's responsibility to transport. If you have any questions, please contact Transportation at 763-600-5590 or transportation@district16.org. Postcards with bus information will be mailed in late August.

Student 1 Name: _____ Grade: _____ School: _____
To School: (choose only one) Ride from existing stop Ride from daycare/alt. A.M. no ride
From School: (choose only one) Ride to existing stop Ride to daycare/alt. P.M. no ride

Student 2 Name: _____ Grade: _____ School: _____
To School: (choose only one) Ride from existing stop Ride from daycare/alt. A.M. no ride
From School: (choose only one) Ride to existing stop Ride to daycare/alt. P.M. no ride

Student 3 Name: _____ Grade: _____ School: _____
To School: (choose only one) Ride from existing stop Ride from daycare/alt. A.M. no ride
From School: (choose only one) Ride to existing stop Ride to daycare/alt. P.M. no ride

Student 4 Name: _____ Grade: _____ School: _____
To School: (choose only one) Ride from existing stop Ride from daycare/alt. A.M. no ride
From School: (choose only one) Ride to existing stop Ride to daycare/alt. P.M. no ride

Student's Home Address: _____
House Number, Street Name, Apt. Number City State Zip

Will your student ride to or from an alternate location other than their home address?

No Yes (If yes, please provide us with the contact information and address for this location.)

Alternate's Name: _____ Effective Start Date: _____

Alternate's Address: _____
House Number, Street Name, Apt. Number City State Zip

Alternate's Phone Numbers: _____

Do these students have a split household and do they need transportation to both locations? No Yes

If your children are shared between split households, please submit this form for both residences and contact us if you have further questions.

Printed Parent/Guardian Name: _____ Contact Phone: _____

Signature of Parent Guardian: _____ Date: _____

Please return this form to the Transportation Department

Mail: Spring Lake Park Schools – Transportation Department, 1415 81st Avenue NE, Spring Lake Park, MN 55432

Drop Off: District Services Center or your child's school **Email:** transportation@district16.org