



Out of District Transportation Request Form

SPRING LAKE PARK SCHOOLS

In order to improve transportation services for all students, we are trying to identify those students who live outside the Spring Lake Park Schools' boundaries, but plan to use district transportation services. If you are requesting transportation service, please complete this form and return it to us. Students not living in the district may ride to and from existing bus stops that are within the district boundary. Bus routes and stops will not be created for out of district service. For safety reasons, all students are limited to one pickup location and one drop off location, and they must be consistent for every day of the week. Should you need to make a change in this information during the school year, please complete a new form. It may take 3-5 business days for changes to take effect. 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. **This form is due by July 15.**

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

Home Phone: _____

Mailing Address (if different from above): _____
House Number, Street Name, Apt. Number City State Zip

Will your student ride to or from a day care provider or alternate location other than their home address?
 No Yes (If yes, please provide us with the contact information and address for this location.)

Day care Provider/Alternate's Name: _____ Effective Start Date: _____

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

Alternate's Phone Numbers: _____

Which existing bus stop location within the district boundary do you wish to use? _____

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