



# Bernard Bus Service

103 NORTHWEST DIVISION ST CHATFIELD, MN 55923



## STUDENT TRANSPORTATION REQUEST

Today's Date: \_\_\_\_\_ Date to Begin: \_\_\_\_\_ Distance from School (Miles) \_\_\_\_\_

Parent(s) Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

\_\_\_\_\_

Mom Cell Phone: \_\_\_\_\_

\_\_\_\_\_

Dad Cell Phone: \_\_\_\_\_

My child(ren) will be riding the bus: \_\_\_\_\_ mornings \_\_\_\_\_ afternoons  
Please provide a schedule to us if several changes are going to be made.

Student Name(s)

Grade

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

My child(ren) will be riding to school in the morning from an address other than my home:

My child(ren) will be riding from school in the afternoon to an address other than my home:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

SPECIAL INSTRUCTIONS/ ADDITIONAL INFORMATION:

\_\_\_\_\_

\_\_\_\_\_

School Bus & Deluxe Motor Coach Service

800-525-4287

www.bernardbusservice.com

507-867-3410