

### Temporary Rider Permit Application

Dear Parent/Guardian,

In accordance with Board Policy EEA elementary students (grades K-5) who live more than one mile from school are eligible for school bus transportation. Secondary students (grades 6-12) who live more than one and one-half miles from school are eligible for school bus transportation. Students who live inside of the one-mile or 1.5-mile distance can apply for bus transportation by filling out and submitting a Temporary Rider Permit Application.

Temporary Rider Permits will only be issued if there is space on an existing bus route. Because eligible riders (those living outside of the one-mile and 1.5-mile distances) have first rights to available seating, a Temporary Rider Permit may be withdrawn at any time during the school year.

Bus stops are designated pickup points in the district busing area. Temporary riders will need to make arrangements to proceed to an established bus stop. New stops will not be added for temporary riders. It is important to note that all riders should arrive at the bus stop five minutes ahead of the scheduled pickup time. Buses will not wait beyond their scheduled pickup time.

Riding the school bus is a privilege. Riders must follow all the rules described in district policy EEACC, *Student Conduct on School Buses*. This policy is available at your student's school or on the Internet at <http://policy.osba.org/sps/E/EEACC%20D1.PDF>

Please fill out the information below and return this application to Transportation Services located at 1890 42nd Street in Springfield, FAX it to (541) 744-6379, or email it to [schoolbus@springfield.k12.or.us](mailto:schoolbus@springfield.k12.or.us). If you are approved for a Temporary Rider Permit, your student will be issued a bus pass. For more information on the Bus Pass program visit the transportation website at <https://www.springfield.k12.or.us/Page/85>.

\_\_\_\_\_  
Student Name \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Student's Home Address \_\_\_\_\_ Phone \_\_\_\_\_  
Street City Zip

Address Student Needs Transportation Service To: \_\_\_\_\_  
Street City Zip

I HAVE READ THE ABOVE INFORMATION AND AGREE TO THE TEMPORARY RIDER CONDITIONS. I UNDERSTAND TEMPORARY BUS RIDERSHIPS ARE ONLY VALID IN THE SCHOOL YEAR IN WHICH THEY ARE GRANTED AND I MUST RE-APPLY EACH SCHOOL YEAR. FORMS WILL BE PROCESSED IN THE ORDER RECEIVED BEGINNING OCTOBER 1. STUDENT MUST HAVE THE SAME TRANSPORTATION SCHEDULE AND BUS STOP LOCATION EACH DAY OF THE WEEK.

\_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_ Date

To Be Completed Transportation Services			
Route #: _____	Approved: _____	Denied: _____	Completed by: _____ <small>Initials Date</small>
Stop Location: _____		Time: _____ <small>AM PM</small>	