

Student Placement Center

2102 University Avenue West Telephone: (651) 632-3700 Saint Paul, MN 55114-1806

Fax: (651) 632-3704

Saint Paul Public Schools Waiver of Transportation 2024-2025

		eturn to Student Placement Centric National Student Placement Centric Nation 1 of the National Student Natio		
		oc@spps.org Fax: (651) 632-3		
Student Name			rthdate	
City		Zip Code		
School Requeste	ed		Grade	
By signing this fo	orm, you are agreeir	ng to the following:		
transporta I will be re I understa	ation area for the 202 esponsible for transp and that excessive ta t in my child being re		·	
		(please print)		
Signature of Parent/Guardian			Date	
Parent/Guardian	Phone Number/s			
OFFICE USE ONLY: Date received				
ID		CSZ		
Copies to: SPC	☐Transportation	School		