

**School Board Employee-Request for Student
School-to-School Transportation**



Student I.D. #: _____ Birth Date: _____
Student Name: _____
Parent/Guardian Name: _____
Home Phone #: _____ Work/Cell Phone #: _____
Email: _____

We offer transportation to children of our employees to a caregiver at employee’s worksite based upon available bus capacity. The school-to-school transportation, until this year, was only for those that qualified for transportation and used the school-to-school bus as their only bus. The program includes:

1. The student must be eligible for home-to-school transportation and they are requesting to use only the employee’s worksite as the address for either before or after school.

Expanded Options with Pay Rider Program (Pay Rider form must be submitted with this request)

2. The student is not eligible for home-to-school transportation but is requesting service with the Pay Rider program and requesting it as school-to-school transportation.
3. Employee is requesting an additional stop besides the home-to-school stop.

Conditions for school-to-school transportation

- No special routes (only minor deviations/stops) required to transport the student and a seat must be available.
- The route does not have a layover where a driver must watch a student prior to delivering the student to the school.
- The school administrator approves the request.
- By signing this application, the parent/guardian is hereby confirming that they are arranging safe transportation for the student in the AM or PM that is not included in the request.

School-to-School Request

School child attends: _____ Employee’s work site: _____

- Request only AM transportation.
 Request only PM transportation.

School-to-School Pay Rider Request (if ineligible for transportation)

- Pay Rider Request School-to-School (ineligible for transportation):** My child is ineligible for transportation because I live less than 2 miles from school or have requested a transfer that makes them ineligible for transportation. I am requesting a school-to-school stop above.

Home-to-School Pay Rider Request (required for 2 stops)

- Pay Rider Request School-to-School plus home Stop (2 stops):** I am requesting the home-to-school stop that I am eligible for in the AM or PM (circle one) plus a school-to-school request above.

Parent/Guardian Signature: _____ Date: _____

Worksite Principal Signature: _____ Date: _____

You will be notified of the status of your request no later than 10 days upon receipt of the request. Please keep a copy of this completed application for your records.

Send completed application to: St. Lucie Public Schools, Transportation Department
325 NW Commerce Park Drive
Port St. Lucie FL 34986 or fax to (772) 340-7134