

**Pay Rider Program Individual  
Transportation  
Request 2020-2021 School Year**



*Each Child, Every Day*

This is to request St. Lucie Public Schools bus transportation for my child to the location(s) listed below. One student per form, and a fee is required for each student. Submit the completed form to:

325 NW Commerce Park Drive  
Port St. Lucie, Florida 34986  
Fax (772) 785-6624  
Phone (772) 204-RIDE (7433)

OR

601 S 29th Street  
Ft. Pierce, Florida 34947  
Fax (772) 468-5122  
Phone (772) 204-RIDE (7433)

Upon verification of the available seat you will be invoiced. The cost is \$100 per semester, no proration, and payable in advance before service begins. Refunds are only provided if space is not available and transportation is not provided.

**TO BE COMPLETED BY PARENT**

Type of transportation requested:

- Two different existing bus stops within the assigned school's transportation area.
- Use of the closest existing bus stop to the 2-mile proximity of the child's school.

*Note: Aftercare/daycare service requests are to be submitted via the approved aftercare providers.*

PLEASE PRINT

Student's Name: \_\_\_\_\_ Age: \_\_\_\_\_

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

School Student Attends: \_\_\_\_\_

Student's registered address with SLPS: \_\_\_\_\_

Requested address for 2nd bus: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

**For Transportation Routing Use Only**

Student Eligible for Transportation YES or NO (circle one) Assigned Bus#: \_\_\_\_\_

Pay Rider Bus #: \_\_\_\_\_ Pay Rider Bus Stop Location: \_\_\_\_\_

**For Transportation Billing Use Only**

Invoice #: \_\_\_\_\_ Date of Invoice: \_\_\_\_\_

Payment Date: \_\_\_\_\_ Effective Rider Date: \_\_\_\_\_