



Springfield Platteview Community Schools  
BUS REQUEST FORM

Student Transportation of America  
10201 Sapp Brothers Dr.  
Omaha, NE 68138  
402-884-4025  
Assistant Manager: Chris Iske

**Please return this form by August 4, 2023, if utilizing this bus service. IF you are not using the bus service, you may disregard this form. A bus service request form MUST be on file in order for your child to be eligible for bus service. When completed, please return this form to the address above OR your child's school.**

Will your child ride the bus TO SCHOOL: YES NO

Will your child ride the bus home FROM SCHOOL: YES NO

Did you use STA bus service last year: YES NO

IF your child rode the bus last year, what route were they on? \_\_\_\_\_

Student's Name (one form per family)	School	Grade

Parents or Guardians \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Cell Phone #1 \_\_\_\_\_ Cell Phone #2 \_\_\_\_\_

Please specify directions to your location OR if this is a group pick up at one of the elementary schools:

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