
SCHOOL TRANSPORT CUSTOMER INQUIRY

Proponent is DoDDS-Europe Transportation Division

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 20, United States Code, Section 921, *et seq.*

PRINCIPAL PURPOSE: To provide information needed to assist sponsors/parents resolving their inquiries concerning school bus services.

ROUTINE USES: To identify specific problems that sponsors/parents or their family members are experiencing, and as source data for improving DoDDS school bus services.

DISCLOSURE: Providing information is voluntary. Not providing information would impede and limit the ability of DoDDS to resolve problems with, and improve, school bus transportation services.

NAME	DATE/TIME
UNIT/ORGANIZATION <i>(Include APO Address)</i>	HOME PHONE
	WORK PHONE
QUARTERS ADDRESS <i>(Street, City)</i>	
WHAT IS YOUR QUESTION OR PROBLEM? <i>(Please provide as much detail as possible)</i>	

NAME OF SCHOOL BUS OFFICE REPRESENTATIVE TAKING INQUIRY	TELEPHONE
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WHAT IS YOUR QUESTION OR PROBLEM? *(Continued)*

HOW WAS PROBLEM/INQUIRY RESOLVED? *(Action taken or answer given)*

FINAL REPLY PROVIDED TO CUSTOMER BY *(Name of School Bus Office Representative)*

DATE/TIME REPLY PROVIDED
