

FIELD TRIP REQUEST FORM

Name of School: _____

Date of Field Trip: _____

Days of School Missed: _____

Location of Field Trip: _____

Grade Level and Number of Students Attending: _____

Number of Chaperones Attending: _____

What form of transportation will be used?* Be Specific. _____

Have field trip rules been explained to the students and chaperones? YES ___ NO ___

Are there students being denied the right to attend due to finances? YES ___ NO ___

Does this trip comply with Title IX equity issues? YES ___ NO ___

Brief Description (Be specific regarding educational purpose):

Please check the appropriate box:

<input type="checkbox"/>	To be used for 1 (one) day trips using school bus or private automobile.* <u>NEEDS PRINCIPAL APPROVAL ONLY.</u> PLEASE SEND ALL FORMS TO DISTRICT OFFICE.
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<input type="checkbox"/>	To be used for overnight trips, trips of more than one instructional day and Co-curricular/ Extracurricular trips. TO BE APPROVED BY THE ASSISTANT SUPERINTENDENT.
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<input type="checkbox"/>	To be used for trips taken by common carrier. TO BE APPROVED BY THE BOARD OF EDUCATION.
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NOTE: FOR BOARD APPROVAL, THIS REQUEST SHOULD BE SUBMITTED TO THE SUPERINTENDENT'S OFFICE BY NOON AT LEAST (11) WORKING DAYS PRIOR TO THE NEXT BOARD MEETING.

Sponsor Signature: _____

Principal Signature: _____ Date Approved: _____

DISTRICT OFFICE USE ONLY

Approved by: _____ *Date:* _____

*** Drivers of private automobiles need to complete the Auto Insurance Affidavit Form.**