

# **FIELD TRIP REQUEST FORM**

Name of School: \_\_\_\_\_

Date of Field Trip: \_\_\_\_\_ to \_\_\_\_\_

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.* <b><u>NEEDS PRINCIPAL APPROVAL ONLY.</u></b> PLEASE SEND ALL FORMS TO DISTRICT OFFICE.
--------------------------	---

<input type="checkbox"/>	To be used for overnight trips, trips of more than one instructional day and Co-curricular/ Extracurricular trips. <b>TO BE APPROVED BY THE ASSISTANT SUPERINTENDENT.</b>
--------------------------	--

<input type="checkbox"/>	To be used for trips taken by common carrier. <b>TO BE APPROVED BY THE BOARD OF EDUCATION.</b>
--------------------------	---

**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.**