

FIELD TRIP REQUEST FORM

TEACHER _____ SCHOOL/CLASS _____

REQUEST DATE _____ TRIP DATE _____ DESTINATION _____

NUMBER OF STUDENTS _____ NUMBER OF STAFF/CHAPERONES _____

COURSE OF STUDY _____

SPECIFIC LEARNING OBJECTIVES TO BE ACCOMPLISHED: _____

STUDENT BEHAVIORS THAT WILL CONFIRM ACHIEVEMENT OF THE LEARNING OBJECTIVES: _____

PRE-TRIP LESSONS/ACTIVITIES TO BE DONE IN THE CLASSROOM: _____

POST TRIP ACTIVITIES/LESSONS TO REINFORCE/EXTEND LEARNING: _____

I have utilized the guidelines in 2340A to plan, conduct, and evaluate the trip and, upon approval of the trip, I will obtain parental permission (2340F2 or F2A) and use the Checklist for Trips (2340 F3).

Field Trip Approval

Trip Approved _____ Trip Disapproved: _____ Principal: _____ Date: _____

For overnight trips or those exceeding 100 miles:

Trip Approved: _____ Trip Disapproved: _____ Superintendent: _____ Date: _____

TRANSPORATION DEPARTMENT

(to be completed by the originator of the field trip)

Date of Trip: _____ Destination: _____

Departure Time: _____ Return Arrival Time: _____ Number of Buses: _____

Certification

This is to certify that this trip, as requested, is in conformity with the administrative guidelines established by The District as well as any applicable State regulations.

Date: _____ Signature: _____ Business Office

Trip Confirmation

This trip has been approved and scheduled. Drivers assigned are:

Bus Driver Report

This is certify that the above trip was made and to request payment under the Board of Education policies.

Date: _____ Bus No: _____ Total time of trip: _____

Speedometer reading at start of trip: _____ Total gallons of gas used: _____

Remarks: _____

Driver's signature: _____

Distribution:

- 1-Each bus
- 1-Transportation Supervisor
- 1-Originator after assignment of buses

Field Trip No.: _____