

Teacher Name: _____

Field Trip: 1 or 2 (please circle one)

FIELD TRIP REQUEST FORM

STEP 1

APPROVAL

Date of Trip: _____

Teacher Name: _____

Grade Level: _____

Number of Pupils: _____

Number of Staff/Chaperones: _____

Destination: _____

Specific Learning Objectives to be Accomplished:

Pre-Trip Lessons/Activities to be Done in the Classroom:

Post Trip Activities/Lessons to Reinforce/Extend Learning:

Principals Signature _____

Superintendent Signature _____

Teacher Name: _____

Field Trip: 1 or 2 (please circle one)

STEP 2 ***TRANSPORTATION***

Physical Address of Trip: _____

Leave time: _____

Return time: _____

Number of riders: _____

Handicapped bus needed: yes or no

InfoFinder completed: _____
Princ. initials Date Completed

STEP 3 ***PAYMENT***

What is the cost for the Field Trip? _____

Submit requisition form to Principal

Forward invoice to Nancy

Select one:

1. Check should be mailed _____ Due date: _____
2. I will take check with me _____