

**RIVER VALLEY SCHOOL DISTRICT  
SCHOOL FIELD TRIP REQUEST FORM**

EMPLOYEE: \_\_\_\_\_ DATE SUBMITTED: \_\_\_\_\_

NAME OF EVENT: \_\_\_\_\_

GROUP TO MAKE TRIP: \_\_\_\_\_

NUMBER OF STUDENTS: \_\_\_\_\_ NUMBER OF ADULTS: \_\_\_\_\_

DATE(S) OF EVENT: \_\_\_\_\_

LOCATION OF EVENT: \_\_\_\_\_

PURPOSE FOR ATTENDING (please be specific/include attachments): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Will an outside agency be contracted to help with this trip? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, name the agency: \_\_\_\_\_

Will written permission slips be requested from the students' parents or guardians? Yes \_\_\_\_\_ No \_\_\_\_\_

Please list the names of all chaperones:

|       |       |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

*IF STUDENTS WILL BE TRANSPORTED BY A CONTRACTED CARRIER, YOU MUST ATTACH A REQUEST FOR TRANSPORTATION.*

| Total of all costs (student and chaperone) for the trip: | DISTRICT FUNDS | ORGANIZATION FUNDS |
|--|----------------|--------------------|
| Registration   | _____          | _____              |
| Meals  | _____          | _____              |
| Transportation   | _____          | _____              |
| Lodging  | _____          | _____              |
| Number of substitute days required _____ x \$95          | Substitutes    | _____              |
|  | TOTAL          | _____              |

Please place a check in the box if registration materials are completed and attached for payment and submission by the Central Office.

Approved/Not Approved \_\_\_\_\_

Building Administrator

Date

Approved/Not Approved \_\_\_\_\_

Superintendent

Date

Board of Directors: Approved \_\_\_\_\_ Not Approved \_\_\_\_\_

OFFICE USE ONLY:

Budget Code: \_\_\_\_\_ (Must be completed by building administrator)

DISTRIBUTION: \_\_\_\_\_ Superintendent  
 \_\_\_\_\_ Building Administrator  
 \_\_\_\_\_ Employee (copy returned after approval)  
 \_\_\_\_\_ Business Office