

**LOCAL/SAME DAY FIELD TRIP RESERVATION REQUEST/APPROVAL FORM**

(Use Form 96B for commercial air, water, overnight, beyond 100 mile radius, out-of-state or country.)

Date of Trip	# of Passengers	School/Grade Level	Departure Time	Destination and Address	Return Time to School

Distance to be traveled one way: \_\_\_\_\_ miles. Method of Transportation: \_\_\_\_\_  
 (Students may not transport students)

Account number: \_\_\_\_\_

Educational Objectives of Proposed Trip: \_\_\_\_\_

**ITINERARY DETAILS:** If the proposed trip includes more than one day of travel use Form NVUSD 96B

# of Students Participating: \_\_\_\_\_ Cost per student (list cost details): \_\_\_\_\_

Cost to Chaperone: \_\_\_\_\_

Teacher(s) in Charge/Submitting Requests: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PRINCIPAL'S APPROVAL**

Release Time: \_\_\_\_\_ Required \_\_\_\_\_ No. of class periods or \_\_\_\_\_ Total school days  
 \_\_\_\_\_ Not Required

**All chaperones/drivers supervising children out of teacher sight have been fingerprinted by NVUSD and cleared by HR**

Trip fulfills specific instructional objectives of a subject included in the NVUSD approved course of study

Trip fulfills objectives of school-sponsored student activities/athletics

APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_  
 \_\_\_\_\_ Principal \_\_\_\_\_ Date

**TRANSPORTATION DEPARTMENT CLEARANCES**

Drivers/Chaperones: \_\_\_\_\_ Check if list is attached to this form

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

\_\_\_\_\_ Volunteer Drivers Cleared to Drive \_\_\_\_\_

\_\_\_\_\_ Vehicle(s) Cleared \_\_\_\_\_

Comments \_\_\_\_\_

(Signed) \_\_\_\_\_ Date \_\_\_\_\_

Approved/Entered in Book \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_