

FIELD TRIP REQUEST FORM

Teacher's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Grade Level / Club: \_\_\_\_\_

Planning Field Trip To: \_\_\_\_\_

For These Days and Dates: \_\_\_\_\_

To Leave School at \_\_\_\_\_ AM or \_\_\_\_\_ PM  
(Bus cannot depart prior to 8:00AM on school days; special requests may be arranged with approval)

From the: (circle one) High School Loop Middle School Loop Elementary Loop

Approximate Time of Return to school \_\_\_\_\_ AM or \_\_\_\_\_ PM  
(Bus must return by 2:15PM on school days; special requests may be arranged with approval)

Number of Students \_\_\_\_\_ Number of Adults \_\_\_\_\_

Bus needed? Yes \_\_\_\_\_ No \_\_\_\_\_ Handicap Bus needed? Yes \_\_\_\_\_ No \_\_\_\_\_

Approximate Miles Round Trip \_\_\_\_\_

List of Expenses Other Than Transportation: \$ \_\_\_\_\_  
\$ \_\_\_\_\_

Expenses to be paid by: \_\_\_\_\_ District \_\_\_\_\_ Students \_\_\_\_\_ Other  
(Specify) \_\_\_\_\_

Cost per Student if at Student's Expense \_\_\_\_\_

Substitute needed? Yes \_\_\_\_\_ No \_\_\_\_\_ Blocks: \_\_\_\_\_

\*If a substitute is needed be sure to tell your building secretary and register in Frontline\*

Teachers Going \_\_\_\_\_

Parents Going \_\_\_\_\_

\_\_\_\_\_  
Approved  
\_\_\_\_\_  
Not Approved  
Principal \_\_\_\_\_ Date \_\_\_\_\_

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Your request for a bus on \_\_\_\_\_ to \_\_\_\_\_

For \_\_\_\_\_ has been received and has been put on the schedule.  
(Class /Club)