

## Tell City - Troy Township School Corporation Field Trip & Transportation Request Form

School:		Trip Date:	
Teacher(s):			
Grade/Class:	# of Students:	# of Chaperones:	# of Wheelchairs:
Destination:			
Educational Purpose:		Grant of Fund to be billed:	
Trip Organizer Signature:			
Date:		Phone Number:	
<p><b>TEACHERS:</b> Please complete the above section of this form and give it to your building administration. Please make sure you have the necessary permission slips for all trips and that you follow the manifest guidelines.</p>			
<p><b>BUILDING ADMINISTRATION:</b> If you approve this request, please email a copy to Kathy VanHoosier at <a href="mailto:kathy.vanhoosier@tellcity.k12.in.us">kathy.vanhoosier@tellcity.k12.in.us</a> to schedule buses and drivers. It is your responsibility to make sure there is proper supervision on the field trip, that funding is available for this trip, and that a manifest of riders is kept.</p>			
Signature:			
Overnight Trips need prior School Board approval.		Overnight Trip: _____	
Action take by the School Board: Approved: _____ Denied _____ Date: _____			
<b>TRANSPORTATION</b>			
Pick-up location:		Estimated Mileage:	
Return date (if more than 1 day):			
Load Time: _____ Bus to be at your school-after 8:15		Return Time: _____ (Must be back before 2:15)	
Type & number of bus(es) needed: Full-Sized Bus _____ # _____ Activity Bus(es) _____ # _____			
Full-Sized Bus Drivers needed: _____		Activity Bus Driver(s): _____ (must be trained before trip)	
<p><b><i>Teachers: You will receive a calendar notice. It is your responsibility to verify the information is correct and notify the Central Office of any changes.</i></b></p>			
Received in Central Office: _____		Scheduled: _____	