

GRAND ISLAND PUBLIC SCHOOLS

8660.1 Extended Field Trip Request Form

1. Provide a description of the trip, including **title, destination, and how it relates to the curriculum and way in which curriculum benefits:**

2. Who will be participating (e.g. team members, club members, etc.)?

3. Anticipated number of students: _____

4. Sponsors: Names, addresses, phone numbers

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5. Describe any costs to sponsors:

6. Cost per student: (Provide breakdown costs for transportation, lodging, registration, etc.)

7. What costs are students responsible for?

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8. What provisions have been made for students who cannot afford to participate?

9. Tour or travel agency, if applicable (attach copy of the contract):

10. Itinerary: attach dates, times, cities, countries, hotels, residences, and form of transportation for each day from the time of departure to return:

11. Insurance underwriter for tour or travel agency (if applicable attach)

12. Name of airline if applicable: _____

13. Name of person completing this form: _____

Activities Director Signature of approval: _____ Date: _____

Campus Principal Signature of approval: _____ Date: _____

Superintendent or designee signature of approval:

_____ Date: _____