

## FIELD TRIP REQUEST FORM

This form must be filled out by the teacher requesting the trip and submitted to the principal. Do not purchase tickets or sign contracts until this request has been approved. Trips must directly relate to a specific unit of study.

Date of Request: \_\_\_\_\_ Teacher: \_\_\_\_\_ Grade: \_\_\_\_\_

Destination: \_\_\_\_\_

Date of Trip: \_\_\_\_\_

### PURPOSE

Purpose of Trip (cite curriculum areas and standards addressed): \_\_\_\_\_

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Departure time: \_\_\_\_\_ Return to School: \_\_\_\_\_ Number of students: \_\_\_\_\_

For trips beyond school hours describe special arrangements: \_\_\_\_\_

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Number of adult chaperones: \_\_\_\_\_

Will another Teacher/Class be accompanying you?     Yes     No

If Yes – Name of Teacher \_\_\_\_\_ # of Students \_\_\_\_\_

### FUNDING

Costs:    Transportation \$ \_\_\_\_\_                      Admission (per person) \$ \_\_\_\_\_

Other costs: \_\_\_\_\_                      Total cost of trip \$ \_\_\_\_\_

Funding sources for this trip \_\_\_\_\_

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Additional Information:

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Approved  Not Approved  Principal's Signature: \_\_\_\_\_

CC: Teacher(s)  
Office  
Kitchen  
Nurse