

School Related Student Trip Request Form

Submit this form two (2) weeks prior to the trip.

SCHOOL _____ FACULTY MEMBER(S) SPONSORING TRIP _____

TYPE OF TRIP (CHECK ONE):

- ☐ Classroom Field Trip ☐ Class (i.e., junior, senior) Trip, specify _____
☐ Organization/Club Trip, specify _____ ☐ Other (athletic, band, if applicable) _____

DESTINATION _____ ADDRESS _____ PHONE _____

- ☐ Out of State ☐ Out of County ☐ Within County
☐ Overnight; give name, address, phone of lodging _____

DATE(S) OF TRIP _____ DEPARTURE TIME _____ RETURN TIME _____

PURPOSE/EDUCATIONAL VALUE _____

No student shall be denied the trip because of an inability to pay.

SOURCE OF FUNDING FOR TRIP _____

BILL TRIP EXPENSES TO:

- ☐ SPONSORING ORGANIZATION ☐ SCHOOL COUNCIL ☐ BOARD ☐ OTHER, SPECIFY _____

SUPERVISION: (ATTACH LIST OF NAMES OF ADULTS ACCOMPANYING STUDENTS ON TRIP.)

NUMBER OF: STUDENTS _____ FACULTY SPONSORS _____ OTHER CHAPERONES _____

TOTAL # OF PARTICIPANTS _____

ALL CHAPERONES HAVE UNDERGONE THE REQUIRED RECORDS CHECK AND BEEN DESIGNATED BY THE PRINCIPAL/DESIGNEE TO SUPERVISE STUDENTS? ☐ YES ☐ NO

MODE OF TRANSPORTATION:IS DISTRICT TRANSPORTATION NEEDED? ☐ NO ☐ YES, SEE PROCEDURE 09.36 AP.212.

- ☐ CERTIFICATED COMMON CARRIER; SPECIFY _____
☐ PRIVATE VEHICLE, IF ALLOWED BY POLICY; SPECIFY DRIVER(S) _____

*Signature of Faculty Sponsor*_____
Date

Trip has been <input type="radio"/> approved <input type="radio"/> disapproved. Reason for disapproval _____ _____ <div style="display: flex; justify-content: space-between;"> <div>_____ <i>Signature of Superintendent/Designee</i></div> <div>_____ <i>Date</i></div> </div>
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For overnight and/or out-of-state trips, approval of the Superintendent and/or Board may be required by policy 09.36.

RELATED PROCEDURES:

09.36 AP.211, 09.36 AP.212, 09.36 AP.23

Review/Revised:8/13/01