

Day Field Trip Request

Date: _____ School: _____

Teacher: _____ Grade: _____

Date of the trip: _____

Destination: _____

Departure Time: _____ Return Time: _____

Number of students attending: _____ Cost per Student: _____ Cost per Adult: _____

Will parent chaperones be expected to pay?: _____

Chaperones (list each name): _____

Has transportation request been filed?: _____

Learning Goals (please attach additional pages if necessary and attach a schedule for the entire trip):

Teacher's Signature: _____ Date: _____

Principal's approval: _____ Date: _____

Superintendent's approval: _____ Date: _____