

## Educational Field Trip Request

A transportation request must be completed for each trip. **Please do not list multiple days/trips on one request.** All trip requests must be filled out legibly and signed by the requester as well as the administrator of the school before it is forwarded to the Superintendent's office for final approval. **Requests Must be Submitted to the Transportation Office 10 days prior to the trip if school is in session or not.** If you will be requesting a meal stop, please include that on the form. Maximum capacity is 44 passengers on each bus except lift buses. If you have any questions, please call extension 5331.

<b>DATE &amp; DAY OF TRIP</b>	<b>SCHOOL REQUESTING TRIP</b>	<b>GRADE &amp; GROUP REQUESTING TRIP</b>	
<b>NAME OF LOCATION</b>		<b>ADDRESS, CITY &amp; ZIP OF LOCATION</b>	
<b>TEACHER (S)</b>		<b>TEACHER (S) CELL PHONE</b>	
<b>ADDITIONAL STOP (1)</b>	<b>ADDITIONAL STOP (2)</b>	<b>ADDITIONAL STOP (3)</b>	

<b>NUMBER OF STUDENTS</b>	<b>NUMBER OF ADULTS</b>	<b>NUMBER OF W/CHAIRS</b>	<b>NUMBER OF BUSES</b>
<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>	<input style="width: 50px; height: 30px;" type="text"/>

**DEPARTURE TIME:** \_\_\_\_\_ AM or PM      **RETURN to school TIME:** \_\_\_\_\_ AM or PM

**Educational Purpose of Trip:** \_\_\_\_\_

**Briefly list Pre Trip Activities:** \_\_\_\_\_

**Briefly list Objectives of Trip & Course of Study:** \_\_\_\_\_

**Briefly list Follow up Activities:** \_\_\_\_\_

**Teachers Signature:** \_\_\_\_\_ **Principals Signature:** \_\_\_\_\_

**Superintendent's Signature:** \_\_\_\_\_