

**FIELD TRIP REQUEST FORM**

- Day Trip, school day                       Overnight Trip, \_\_\_Nights  
 Day Trip, nonschool day                       Out-of-State Trip, \_\_\_Nights

Date(s) of Trip: \_\_\_\_\_ Alternate(s): \_\_\_\_\_

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

*If overnight or out-of-state: Intermediate destinations, departure, and arrival times:*

\_\_\_\_\_

Date of Request: \_\_\_\_\_ # days prior to trip: \_\_\_\_\_

Sponsoring Group: \_\_\_\_\_ School: \_\_\_\_\_

Number of Students Participating: \_\_\_\_\_ Number of Chaperones \_\_\_\_\_

Purpose of Trip: \_\_\_\_\_

*Attach documentation for scheduled events, programs*

Swimming included: Yes \_\_\_ No \_\_\_ *If yes, complete E(2) 6153*

Estimated cost of trip: \_\_\_\_\_ Cost per student: \_\_\_\_\_

Charged to: \_\_\_ School M/E    \_\_\_ Student Body    \_\_\_ Athletics    \_\_\_ Organization budget  
                   \_\_\_ Fund-Raising    \_\_\_ Student/Parent Contribution    \_\_\_ Other

CHECK WITH BUDGET SECRETARY FOR FINANCIAL REQUIREMENTS & DEADLINES.

Mode of Transportation: \_\_\_ Contract bus    \_\_\_ Employee car    \_\_\_ Volunteer car  
   \_\_\_ Student driven car    \_\_\_ Other: \_\_\_\_\_

*Automobile transportation requires completed Driver Certification Form E(1) 3541.1 and insurance declarations*

Insurance Coverage Needed: *(See 5142 - Insurance)*

\_\_\_ Day Trip: Student insurance for students not covered by their own or parent's insurance, insurance available through the District

\_\_\_ Overnight or Out-of-State Trip: Extended Short-Term Group Coverage, available through the District

Staff Member in Charge, Print Name: \_\_\_\_\_

I have read and will abide by Board policies and regulations pertaining to field trips.

*(cf. 6153 - District-Sponsored Trips)*

*(cf. 5142 - Transportation for School-Related Trips)*

*(cf. 3541.1 - Insurance)*

Signature \_\_\_\_\_

Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_

**TAMALPAIS UNION HIGH SCHOOL DISTRICT**  
 Larkspur, California

STUDENTS:

PRIOR TO THE FIELD TRIP DATE, RETURN COMPLETED FORM TO THE TEACHER CONDUCTING THE FIELD TRIP.

TEACHER:

SUBMIT LIST TO THE ATTENDANCE OFFICE AND PRINCIPAL'S OFFICE PRIOR TO THE TRIP. SUBMIT THESE FORMS FOLLOWING FIELD TRIP TO ATTENDANCE OFFICE. IF A TEACHER DOES NOT SIGN THE FORM, THE STUDENT CANNOT ATTEND THE FIELD TRIP.

TEACHER APPROVAL

*The student listed on the form has my permission to attend the activity described. He/she understands that arrangements must be made to make up all missed classroom work.*

Period	Subject	Teacher's Signature	Approval
Tutorial			Yes___ No___
1 <sup>st</sup>			Yes___ No___
2 <sup>nd</sup>			Yes___ No___
3 <sup>rd</sup>			Yes___ No___
4 <sup>th</sup>			Yes___ No___
5 <sup>th</sup>			Yes___ No___
6 <sup>th</sup>			Yes___ No___
7 <sup>th</sup>			Yes___ No___