

FIELD TRIP REQUEST FORM

- Day Trip, school day
- Day Trip, non-school day
- High Risk Trip, (i.e. ropes course, non-interscholastic swimming, TEAM extended field trips)
- Overnight Trip _____ Nights
- 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 #(2) 6153*

Estimated Cost of Trip _____ Cost per Student _____

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: _____

Automotive transportation required completed Driver Certification Form #(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)

Staff Member Signature _____

Principal's Signature _____ Date _____