



**EXTENDED FIELD TRIP REQUEST FORM**

In accordance with Board of Education Policy 6153, Field Trips, all extended field trips must be approved by the Superintendent of Schools. The following information must be forwarded to the Superintendent in "TRIPLICATE" 60 days (6 months for international trips) prior to the Board meeting which precedes the trip.

Name of School \_\_\_\_\_ Date of Request \_\_\_\_\_

Name of Club or Activity \_\_\_\_\_

Trip to \_\_\_\_\_ Purpose \_\_\_\_\_

Number of students participating \_\_\_\_\_

Dates of Trip: From \_\_\_\_\_ to \_\_\_\_\_

Number and names of teachers and chaperones: (Give ages of chaperones under 25 and list relationship of all chaperones to system or staff)

a. \_\_\_\_\_ e. \_\_\_\_\_

b. \_\_\_\_\_ f. \_\_\_\_\_

c. \_\_\_\_\_ g. \_\_\_\_\_

d. \_\_\_\_\_ h. \_\_\_\_\_

Others: \_\_\_\_\_

Transportation: Bus \_\_\_\_\_ Train \_\_\_\_\_ Plane \_\_\_\_\_ Car \_\_\_\_\_ Other \_\_\_\_\_

Are fund-raising activities planned? \_\_\_\_\_ If so, describe \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Lodging: Hotel/Motel \_\_\_\_\_ Camp \_\_\_\_\_ Private Home \_\_\_\_\_

If known, please give specifics of room assignments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Insurance Arrangements for Staff and Students: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Cost per Teacher and/or Chaperone \$ \_\_\_\_\_

Cost per Student \$ \_\_\_\_\_

If Travel Agencies are engaged, at least three quotations need to be approved with documentation attached to this form:

a. \_\_\_\_\_ c. \_\_\_\_\_

b. \_\_\_\_\_ d. \_\_\_\_\_

Signature of teacher making request \_\_\_\_\_

Type Name: \_\_\_\_\_

Approved by Department Head at

Secondary Level: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by Principal: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized by Superintendent or Designee:

\_\_\_\_\_ Date: \_\_\_\_\_

Attachments: Quotations  
Itinerary

White - Superintendent's Office  
Canary - Principal  
Pink - Staff Member