

Field Trip Request Form

This form must be submitted at least two weeks prior to departure date.

Date	Request Submitted:					
Club	/ Class /Team Requesting Tr	rip:				
Desti	nation:					
Dates	s & Times:					
	Departure Date:	Departu	re Time:			
Return Date:		Approx	Approx Return Time:			
Justif	fication / Purpose of the Trip:	:				
Sune	rvising Teacher or Moderator	r signature:				
-	e of Transportation:					
Mode	Cos		Provider:			
Trans	sportation					
Parking						
Lodging						
Food						
Student Insurance			Meyer/Ste	vens		
Т	Total per Student Cost:					
Appr	ovals:					
#1 D	epartment Chair:		Date	(Classes Only)		
D	rirector of Student Activities		Date	(Clubs Only)		
D	rirector of Special Projects		Date	(Academic Teams)		
#2 A	sst Principal for Academics or Stud	dent Life:	Date			
#3 H	R/Risk Management:			Date		
#4 Pr	rincipal:			Date		
#5 D	ean:			Date		

Parent Chaperones: Must have completed all volunteer requirements listed below prior to departure date. (reminder: fingerprint clearance may require up to 30 days) Ratio of chaperones to students is 1:12.

Chaperone Name	Fingerprints	Shield the Vulnerable	Driver's Info Sheet	Volunteer Agreement	Confidentiality Agreement
	To be completed by the Dean's Office				
least 72 hours prior to the departure date.					