

# EVERETT PUBLIC SCHOOLS FIELD TRIP REQUEST

**Distribution:**

- ☐ Principal
- ☐ Health Room
- ☐ School Kitchen Manager
- ☐ Transportation Department

**FOR TRANSPORTATION  
USE ONLY**

Transportation Code:

Trip Date(s): \_\_\_\_\_ Trip Category: (circle) **1** **2** **3**

School: \_\_\_\_\_ Adults \_\_\_\_\_

Classes or groups: \_\_\_\_\_ Students \_\_\_\_\_

Coordinating Staff Member(s): \_\_\_\_\_ Total \_\_\_\_\_

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

Address: \_\_\_\_\_

Educational Objectives of Trip: \_\_\_\_\_

Special Transportation Instructions: \_\_\_\_\_

Budget Code to Charge: \_\_\_\_\_

☐ District Bus ☐ Commercial Transportation ☐ District Vehicle ☐ Other: \_\_\_\_\_

☐ No District Transportation Provided (parent/guardian arranged transportation)

**Departure Times**

**Return Times**

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

Arrive at School: \_\_\_\_\_ [ ] AM [ ] PM Leave Destination: \_\_\_\_\_ [ ] AM [ ] PM

Leave School: \_\_\_\_\_ [ ] AM [ ] PM Return to School: \_\_\_\_\_ [ ] AM [ ] PM

Name of Staff for whom Substitute is Needed:	Name of Substitute Requested:	Date Needed:	Grade/Subject
			[ ] Full [ ] AM [ ] PM
			[ ] Full [ ] AM [ ] PM
			[ ] Full [ ] AM [ ] PM

Submitted by \_\_\_\_\_ Date \_\_\_\_\_ Supv/Coord/Principal \_\_\_\_\_ Date \_\_\_\_\_ Transportation Supervisor \_\_\_\_\_ Date \_\_\_\_\_