

FIELD TRIP REQUEST FORM

Teacher(s)/Grade Level: _____

Trip Date(s): _____

Time leaving school: _____

Time arriving back at school: _____

Trip Destination: _____

Cost: _____

Method of payment (i.e. Purchase Order, Pre-paid check, etc.) _____

Mode of transportation:

_____ District bus

_____ Community Transit

_____ Walking

Number of students: _____

Number of Adults: _____

Volunteers Approved: _____

Objectives: _____

How this field trip will increase student learning: _____
