

NINE MILE FALLS SCHOOL DISTRICT

Day Field Trip Request and Authorization Form

2320F-1

All field trips and student excursions must be submitted for approval at least two (2) weeks prior to trip.

School _____ Today's Date: _____

Teacher: _____ Class: _____

Destination: _____

Purpose-Learning Goals: _____

Date of Trip: _____ Alternate Date: _____

Departure Time: _____ Return Time: _____

Number of Students _____ Number of Adults _____

Meal Plan: _____

Special Transportation Instructions: _____

Funding Source(s): General Vocational ASB Other _____ Bill _____
Boosters PTG PTN

Field Trip Supervisor/Applicant: _____

Signature: _____

Attach the following for review:

- | | |
|------------------------------------------------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> Draft communication to parents regarding field trip | <input type="checkbox"/> Bus Needed Quantity: _____ |
| <input type="checkbox"/> Draft permission slip | <input type="checkbox"/> Special Needs _____ |
| <input type="checkbox"/> Draft chaperone guidelines and training plan | <input type="checkbox"/> Van Needed Quantity: _____ |
| <input type="checkbox"/> List of Students Participating | |

Principal Approval: _____ Date: _____

Business Office Use

Food Services Notified: _____ Date: _____

Medical Plan Reviewed by School Nurse: _____ Date: _____

Transportation Manager Acknowledgment: _____ Date: _____

District Approval: _____ Date: _____

Purchase Order

Event PO #

Transport PO #

REV 072023